

Georgia Public Safety Fire Investigators Association, Inc.

Membership Application

New Membership [____] / Renewal [____]

Name: _____
(Last) (First) (MI)

Agency/Department: _____

Address: _____

(City) (State) (Zip) (County)

Rank/Title: _____ Phone: _____

Fax: _____ E-mail: _____

VOTING MEMBER []

A Voting Member is any person, who is an active member of a governmental public safety agency within the State of Georgia that is actively engaged in the investigation, prevention, or prosecution of fires.

NOTE: Please include a copy of Agency/Departmental Identification for Voting Member request

(**Departmental Identification need not be attached if prior approval is made by a GPSFIA Board Member**)

(Voting Member Membership Dues \$15.00 Annually)

ASSOCIATE MEMBER []

An associate member is a person or organization who exhibits an interest in prevention, investigation, or prosecution of arson activity, whose talents and interests can be of benefit to the GPSFIA.

(Associate Member Membership Dues \$15.00 Annually)

(Make check payable to: G.P.S.F.I.A.)

Mail to:

G.P.S.F.I.A.

P.O. Box 84

Athens, GA 30603

(GPSFIA Office Use Only)

Date Received: _____

Payment Check [] Check #: _____

Cash []

Received By: _____