

## ADMINISTRATIVE Fire Services Section

## **Annual Membership Registration**

Name (as it will appear on your name badge and in the Membership Director	(Y) Title	E-	-mail address
Fire Department/Organization Name			
What Division do you work for? (please check all that apply	) (If Other, fill in Division	name)	
Administration Finance Prevention Training	Other		
Work Address	City, State, Zip+4		
Home Address	City, State, Zip+4		
Preferred Mailing Address (please check one)	Work	Ноте	
Phone Numbers- include area code (for the Membership Directory)	Office	Cell	Home
Date of Hire (MM/YY)	DOB (MM/DD/YYYY	)	
Membership (please check one) New Member	Renewal 🗆		
Membership Type (please check one)			
Active \$60	☐ Life \$10 ☐	Honorary \$0	

For membership questions or status please contact Annette Arnesen at (562) 944-9713 ext 3825 or (AnnetteArnesen@SantaFeSprings.org)

Mail this form & check (made payable to AFSS Southern Division) to:

Annette Arnesen c/o Santa Fe Springs Fire Department 11300 Greenstone Ave Sante Fe Springs, CA 90670-4619