Stamford Centre Volunteer Firemen's Association

APPLICATION FOR MEMBERSHIP

I,	
(PLEASE PRINT)	
Hereby make application to become a member of:	
THE STAMFORD CENTRE VOLUNTEER FIREMEN'S ASSOCIATION	
In making this application, I agree, that if I am accepted, I will obey all by-laws, rules and regulations of the association. I further agree that I will pay each year, such dues as may be set by the association so long as I shall remain a member.	
I understand that for the first year of membership, I will be a probationary member, and I will not become eligible to become a shareholder until approved by the shareholders following my probationary year. An application fee of \$30.00 (full year) shall accompany this form.	
DATE: SI	GNATURE:
ADDRESS:	Postal Code
PHONE:	AGE:
Email Address:	
Please provide a brief "bio" of yourself in your email return, along with this attachment, or on a separate sheet of paper (if filled out manually).	
REFERENCES: NAME	phone:
NAME	phone:
RECOMMENDED BY:	DATE:
	DATE:
DATE APPROVED BY EXECUTIVE:	
DATE APPROVED BY DIRECTORS:	
DATE APPROVED AS A SHAREHOLDER:	

This document may be emailed to: scvfasecretary@cogeco.ca