

## **APPLICATION FOR MEMBERSHIP**

DATE: \_\_\_\_\_

Apply online at <u>www.fama.org</u> or c		
ENTITY APPLYING FOR MEMBERS		
List Parent or Subsidiary Compani	es:	
CONTACT NAME:	TITLE:	
STREET ADDRESS:		P.O. BOX
CITY:	STATE/PROVINCE:	
COUNTRY:	ZIP/POST	AL CODE:
PHONE: ( ) MO	BILE: ( )	FAX: ( )
WEBSITE:	EMAIL: _	
entities that, during the preceding 12 mon United States or Canada, has manufactured fire protection apparatus, including rescue (collectively called "fire apparatus" herein, apparatus manufacturer as a permanent per for fire service applications that are affixed fire apparatus in performing its firefightic include, without limitation, chassis, fire pure other water control appliances. For purpose fabrication of a qualifying product from raw or the assembly of a qualifying product using The entity applying for membership manufaction. The entity applying for membership is a material of the firefighting for the firefighting of the firefighting for membership is a material form.	If for commercial resale any of vehicles and command vehicles (B) components or products of the completed fire apparation, or carried upon, the fire apparation, or carried upon, the fire apparation, fire hoses, hose reels, lad ses of this section, the term of materials, or the assembly on parts, components, or subactures within the United Stanufacturer of:  (apponents: (Please specify):	the following products: (A) firefighting or les intended for use in emergency services which are later incorporated by the fire ratus; or (C) products specifically designed apparatus for use in conjunction with the tion. Examples of such products would ders, aerial devices, apparatus valves and manufacture" means the construction or f a qualifying product from raw materials, assemblies that are supplied by others.  tes or Canada: ( ) Yes ( ) No  Rescue (Special Service) Vehicles
<u>Dues Assessment Schedule</u>		
☐ Current and renewed members		\$ 1,900.00 (full assessment)
☐ New Applicants (first year, first-time	applicants only)	\$ 1,900.00 */**
* Includes one complimentary registration		
Non-cash value: \$425. Credit for meeting ** If the new member application is recei		
membership at no fee.	ved after way 1 , the new h	iember will receive the next years
AMEXMC / VISACARD NUMI	BER	
NAME ON CARD		EXPIRATION DATE
BILLING ADDRESS OF CARD		
	STATE/PROVINCE	