



IDAHO VOLUNTEER FIRE & EMERGENCY SERVICES ASSOCIATION

Membership Application

Name _____

Home Address _____

City _____ State _____ Zip _____

E-mail _____ Phone (____) _____

Beneficiary for \$10,000 AD&D Policy: _____

Emergency Response Department: _____

Choose a Membership Class

- Volunteer** **\$35.00**
Current volunteer emergency responder (Including Retirees)
- Chief Officer** **\$35.00**
Current chief officer of a volunteer or combination fire/EMS department
- Associate** **\$35.00**
Support the volunteer fire & emergency services

- Individual Member –**
Check Enclosed (make checks payable to IVFESA)
(Payment by credit card is available on IVFESA.org)
- Membership through an Idaho Volunteer Department**

- please sign & date –

Signature

Date

Mail Applications and Payments to: IVFESA - 372 S Eagle Rd #303 - Eagle, ID 83616