



STATEMENT FOR ANNUAL DUES
FOR THE YEAR 7/01/2017 – 6/30/2018

TOLL FREE 1-888-640-5655 www.vsfa.org

PLEASE ENCLOSE \$5.00 FOR EACH MEMBER
BY AUGUST 1, 2017. Detach and mail bottom portion to:

Virginia State Firefighter's Association
Lauren Kirby, Secretary
PO Box 230385
Centreville, VA 20120

NOTICE

By-laws Article 1 Section 2

The annual dues of each Company or department shall be five dollars and no cents (\$5.00) for each member on their books in good standing, and shall be forwarded to the State Association Secretary on or before August 1st each year. In the event of non-payment of dues, the Company or Department shall be denied the privilege of representation in the annual or special meetings of the Association.



Enclosed find payment for _____ members at \$5.00 each for a total of \$ _____
to be applied for **7/01/2017 – 6/30/2018**.

We're updating our records. Please provide current contact information (or business cards) so we can reach key individuals should we have questions about membership or other VSFA business. *Information provided is for the purposes of VSFA business and will not be shared.*

Department or Company Name: _____

Mailing Address: _____

Company Email Address: _____

Mark: Chief or President's Information: *please write clearly.*

Name:		Email Address:	
Station Phone:		Cell Phone:	

Secretary's Information: please write clearly.

Name:		Email Address:	
Station Phone:		Cell Phone:	

Treasurer's Information: please write clearly.

Name:		Email Address:	
Station Phone:		Cell Phone:	