



## The Fire Fighters' Association of Ontario

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### Individual Membership Application

Date of application \_\_\_\_\_

Fire Department Name \_\_\_\_\_

Station name & number if applicable \_\_\_\_\_

Address \_\_\_\_\_

Postal Code \_\_\_\_\_

Name of Contact Person \_\_\_\_\_

Telephone Number \_\_\_\_\_

Email \_\_\_\_\_

**Please print the above information clearly.  
This information will be used as your mailing address for all correspondence.**

**Please make cheques payable to FFAO and submit to:**

**Please return to:** FFAO Membership Chair  
Bevin Brooks  
550 Havelock Ave. S.  
Listowel ON  
N4W 3T6

Confirmation of acceptance will be sent to you. Note: Annual membership runs from August 1<sup>st</sup>- July 31<sup>st</sup> and is payable at the start of the year. Annual membership invoices are sent along with the notice prior to the first quarterly meeting held on the last Sunday of October.

**Annual Dues: \$50.00 per year**

If you have any questions, please feel free to contact the Membership Chairman at:  
membership@ffao.on.ca