



Application for Membership
ILLINOIS FIRE CHIEFS' ASSOCIATION
 Organized September 16, 1951

Dated _____ 20__

I, _____, hereby apply for membership in this association known as the ILLINOIS FIRE CHIEFS' ASSOCIATION, and further, agree to abide by the Laws and By-Laws of said association as laid down by appointed and/or elected officers and committee members or their appointees or successors.

(Please Type or Print) *NOTE: Membership dues include one subscription to THE GONG*

Last Name	First Name	Name of Department		
Department Address or Mailing Address you Desire		City	State Zip	County
Office Phone	Fax Phone	E-mail Address		
Department Type (please mark one) <input type="checkbox"/> Municipal <input type="checkbox"/> District <input type="checkbox"/> Other		Department Classification: <input type="checkbox"/> Volunteer <input type="checkbox"/> Paid-on-Call <input type="checkbox"/> Career <input type="checkbox"/> Combination		
Title/Rank	Applicant Signature	No. of Career Personnel	No. of Volunteer/POC Personnel	No. of Contract personnel

Please check the box next to the Dues category that you are making application for. Thank You

CATEGORY: ACTIVE 1 ANNUAL DEPARTMENT/DISTRICT DUES	DUES	CHECK ONE
For department/district with 25 or fewer Paid on Call or Volunteer Members	\$100.00	<input type="checkbox"/>
For department/district with 26 or more Paid on Call or Volunteer Members	\$150.00	<input type="checkbox"/>
For department/district with more than 5 to 20 Career Members	\$200.00	<input type="checkbox"/>
For department/district with 21 to 100 Career Members	\$300.00	<input type="checkbox"/>
For department/district with 101 to 500 Career Members	\$400.00	<input type="checkbox"/>
For department/district with 501 or more Career Members	\$500.00	<input type="checkbox"/>
Active 1 Membership department/district dues include membership for a Chief Officer and one designee from the same organization.		
Designee Name:	Rank:	
Office Phone:	E-mail address:	

Note: Career shall mean any paid or full-time member working in excess of 30 hours per week with any firefighting or EMS response or command duty and includes personnel obtained through an independent contractor.

CATEGORY: ACTIVE 2 ANNUAL DUES FOR ADDITIONAL MEMBERS	DUES	CHECK ONE
Each additional department/district member (Once Active 1 Annual Dues are paid)	\$40.00	<input type="checkbox"/>

Provide names of each member below (make additional copies for more than 1)

Last Name:	First name:
Mailing Address you desire:	City: State: Zip County
Office Phone:	Fax: E-mail address:
For future renewal of membership Please check one: <input type="checkbox"/> Bill Department <input type="checkbox"/> Bill Individual	Rank:

RETIRED & ASSOCIATE MEMBERSHIP	DUES	CHECK ONE
Retired Emergency Service Personnel	\$22.00	
Associate Membership	\$70.00	

Questions: 800/662-0732 or 847/966-0786 • Fax 847/966-0782 • website: www.illinoisfirechiefs.org

Please send completed application and payment to: Illinois Fire Chiefs Assn., PO Box 7, Skokie IL 60076-0007