



FIRE SERVICE WOMEN OF ILLINOIS, NFP
MEMBERSHIP APPLICATION
WWW.FSWI.ORG

I, _____, hereby apply for membership to the organization known as the **FIRE SERVICE WOMEN OF ILLINOIS, NFP**, and agree to abide by the bylaws of said organization as approved by the appointed Board of Directors and/or their successors.

Please complete the following application by typing or printing the information requested.

Is this a RENEWAL? _____

Name _____ Date of application _____

Address _____ City/State/Zip _____

Phone number _____ E-mail address _____

Department _____ City/State/Zip _____

Department Classification (please circle or check all those that apply):

FIRE EMS VOLUNTEER PAID-ON-CALL CAREER COMBINATION

Department Type (circle or check one): MUNICIPAL DISTRICT OTHER

Number of years of service: _____

Individual Membership – Members are entitled to vote and to serve on the Board of Directors and to access the benefits found in the Members-Only area of website.

Cost \$ 40.00

Dues are paid annually by December 31st of each year.

Pay online via PayPal at www.fswi.org and email your completed form to: admin@fswi.org
OR

Submit a check payable to Fire Service Women of Illinois, NFP, with your completed application to the address below:

FSWI
P.O. Box 2153
Montgomery, IL 60538