

APPLICATION FOR MEMBERSHIP

Society for the Preservation and Appreciation of Antique Motor Fire Apparatus in America

Please print and mail to:
Barbara Connors, Membership Secretary
5420 S. Kedvale Avenue
Chicago, IL 60632-4232

Make checks payable to **SPAAMFAA** in USA funds

Or by VISA/MC _____ EXP _____

Junior Membership (J) - \$18.00 ___ _____ Date of Birth _____

Individual Membership (I) - \$25.00 ___

Family Unit Membership (U) - \$30.00 ___

Organization Membership (O) - \$30.00 ___

Organization Contact Person _____

Individual Life Membership (L) - \$400.00 ___

Family Life Unit (LF) - \$500.00 ___

Street or Box No. _____

City & State _____ Nine digit ZIP _____ - _____

Phone () _____ Phone Number published in Roster Yes ___ No ___

E-mail _____

Fire Apparatus Owned Yes ___ No ___ A Special form will be sent to you to list your apparatus

Do you belong to a SPAAMFAA Chapter? _____

How did you hear of us? Web page _____ a friend _____ a publication _____ at a muster _____

at a convention _____ which one? _____

**The membership year is February through January. Dues accepted after November 1
apply to the next year.**