



2024 IFA Individual (Self Paid) New Member Application

Membership Term: January 1, 2024 to December 31, 2024

Being an active member in good standing of the _____ (Dept.Name), Iowa Fire Department, I hereby apply for membership in the Iowa Firefighters Association and herewith tender the sum of \$17.00 in the payment of dues for the current year. The dues are \$17.00 per year, per member.

Applicant's signature: _____

Date of Application: _____

Amount Enclosed: \$ _____

Please print or type:

Full Name: _____

Email: _____

Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Have you ever been a member of the Association before? Yes _____ No _____

Mutual Aid: Members who wish to join the Mutual Aid Department for a \$500 death benefit must fill out a Mutual Aid application form. Membership in the Mutual Aid Department shall be limited to members in good standing with the IFA whose age does not exceed 40 years upon the date of application, and who are then in good health, both of which facts must be verified in writing by two members of the IFA or by Chief or Secretary of the applicant's local fire department. Mutual Aid membership dues are \$10 for each member per year.

Iowa Firefighters Association

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