



Fire Marshals' Association of Missouri

2011/2012 Membership Application

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ ZIP _____

Phone: _____ County: _____

Email: _____

Payment: (circle one) Credit Card Check

Credit Card Info: (circle one) VISA M/C DISCOVER

Card Number: _____

Exp: _____ Sec. Code: _____

Membership Dues: Regular or Associate \$30.00

Send completed form to: David E. Phipps
Secretary/Treasurer
16847 Paradise Peak Circle
Wildwood, MO 63011