



FIRE K9.ORG Membership Application

\$50/yr Active Member Currently working as active or retired Fire K9 handler.
(Includes all benefits and voting privileges)

\$75/yr Associate Member Fire and law enforcement agencies, investigators, dog trainers & breeders, corporations, canine suppliers, insurance companies, labs, researchers, and others who wish to support Fire K9.org. (Does not include voting privileges)

Both memberships require sponsorship by a Fire K9.org Member

Name _____ Phone _____

Cell _____

Primary Address _____ Home _____ Business _____

City, State, Zip Code _____ E-mail address _____

Phone _____

Secondary Address _____ Home _____ Business _____

City, State, Zip Code _____ E-mail address _____

Company _____ Title _____

Company specializes in _____

Affiliation: ___ K9 Handler ___ K9 Trainer/Breeder ___ K9 Supplier/Vendor ___ Police/Fire/Public Service

___ Insurance ___ Investigator ___ Lab/Researcher ___ Other _____

Have you ever been convicted of a felony, misdemeanor or any crime? Yes ___ No ___

(If yes, explain) _____

Have you ever been denied membership in any working canine organization? Yes ___ No ___

(If yes, explain) _____

Do you give Fire K9.org permission to use photos of you and your K9 for promotional purposes? ___ Yes ___ No

I confirm that all information given by me in this application is true and correct and hereby make application for membership in FIRE K9.org in accordance with its membership rules as an:

Select One: ___ Active Member (50.00/yr) ___ Associate Member (\$75/yr)

Applicant Signature _____ Date _____ Sponsored by (FIRE K9.org Member) _____

___ Enclosed is our payment in the amount of \$_____ on my check # _____. **Make checks payable to: Fire K9.org**

___ Charge to my ___ Visa or ___ MasterCard:

Card # _____ Exp Date _____ Sec Code _____

Billing Address: _____

Authorized Cardholder Name _____ Cardholder Signature _____

Fax this form with payment information to (707) 963-3357 or mail form and payment to PO Box 71 – St Helena, CA 94574

Office Use Only Sponsor _____ Date Rec'd: _____

Recommended for Approval: Yes ___ No ___ By _____

Board Review & Approval Yes ___ No ___ Date _____