Western Pennsylvania Firemen's Association Membership Application

Name		Birth Date	
Address		Beneficiary	
City	Zip	MEMBERSHIP DUES:	
		Ages 14 and Over: \$6 per year	
CERTIFIED BY COMPANY:		Company Membership: \$10	
		We Insure Junior Firefighters	
I certify that the appli-	cant is a member in good standing of		
	Fire Department.	AMOUNT ENCLOSED \$	
		Mail to:	
Signed			
		T. Shank Executive Director-Secretary	
Officer	Title		
	ay Death Benefit of \$400.00	P.O. Box 504, New Kensington, PA 15068-0504	
Name	Memb	Ivania Firemen's Association ership Application Birth Date	
vame			
Address		_ Beneficiary	
City	Zip	MEMBERSHIP DUES:	
		Ages 14 and Over: \$6 per year	
CERTIFIED BY COMPANY:		Company Membership: \$10	
		- · ·	
I certify that the appli-		We Insure Junior Firefighters	
	cant is a member in good standing of		
	cant is a member in good standing of Fire Department.	We Insure Junior Firefighters	
Signed	Fire Department.	We Insure Junior Firefighters	
		We Insure Junior Firefighters AMOUNT ENCLOSED \$ Mail to:	
Officer	Fire Department.	We Insure Junior Firefighters AMOUNT ENCLOSED \$	

P.O. Box 504, New Kensington, PA 15068-0504

We pay Death Benefit of \$400.00