



**MISSISSIPPI
FIRE
INVESTIGATORS
ASSOCIATION**

RETURN TO:

M.F.I.A.
Margaret A. Pinter
3200 Payne Road
Lucedale, MS 39452

APPLICATION FOR MEMBERSHIP

I Hereby make application for ACTIVE() ASSOCIATE() Membership in the Mississippi Fire Investigators Association (Mississippi Chapter of the International Association of Arson Investigators) in accordance with its Constitution and By-Laws and agree to be bound therewith. I am transmitting fifteen dollars (\$15.00) with this application. This includes ten dollars (\$10.00) annual dues and five dollars (\$5.00) initiation fee. All information given by me is warranted to be true.

PERSONAL:

Name:

First MI Last
Home Address: _____
(Street & #, PO Box #, Apt. #) City State ZIP Home Phone

EMPLOYMENT:

Employer: _____ Employer Phone _____

Employer Address: _____
(Street & # or PO Box) City State ZIP

Length of Employment: _____ Position: _____

Are you a member of the International Association of Arson Investigators? _____ If Yes - IAAI# _____
QUALIFICATIONS FOR MEMBERSHIP: (Length of service, duties, degrees, honors, etc.)

REFERENCES: (List complete name, address, phone number and occupation.)

1. Name: _____ Occupation: _____
Address: _____ Phone # _____

2. Name: _____ Occupation: _____
Address: _____ Phone # _____

MFIA MEMBER RECOMMENDATION: (Name of MFIA member in good standing.)

Name: _____ Address: _____
City/State/Zip: _____ Phone # _____

Signature of Applicant _____ Date: _____

SIGNATURE OF APPLICANT INDICATES PERMISSION FOR FULL BACKGROUND INVESTIGATION

FOR MFIA USE ONLY

APPROVED _____ DISAPPROVED _____, If disapproved, Reason _____

Signature of Secretary _____ Date: _____