The Southwest Georgia Association of Fire Chiefs'

SOWEGA CHIEFS' Post Office Box 1169 Camilla Georgia 31730

APPLICATION FOR MEMBERSHIP

NAME:	
ADDRESS:	
CITY	STATE
E-Mail Address:	
Phone Number:	
Cell Number:	.
FIRE DEPARTM	ENT OR COMPANY INFORMATION
DEPARTMENT or BUSINESS NAME	
POSITION	
P. O. BOX	SUITE #
CITY	STATE ZIP
COUNTY	
TELEPHONE	FAX
EMAIL	
Web Site	
	Type of Application:
[] – New [] – Renewal Ple	ase check either New or Renewal
[] – Active (\$10.00 per year) Vo	ting Member
[] – Associate (\$ 10.00 per year) N	on-voting Member
$[__]$ – Sustaining (\$200.00 per year)	Non-voting Member
[] – Honorary Life (no dues) Votin	ng Member
[] – Section (\$ 25.00 per year) Non	-voting
Checks should be made payable to:	SOWEGA CHIEFS' Post Office Box 1169 Camilla Georgia 31730