



Membership Application 2020 Membership Fee \$25.00

Name: _____ Date: _____

Title: _____

Employer Name/Address: _____

Preferred Address: Yes/No

Affiliation: _____

Home Address: _____ Preferred Address: Yes/No

City/Town _____ State: _____ Zip: _____

Work Phone: _____ Extension: _____

Fax Number: _____ Home Phone: _____

Email: _____

Applicants Signature: _____

Student Membership \$0.00 – By checking this box, I am verifying I am a student

Name of School: _____

Please make check for \$25.00 payable to:

NH Fire Prevention Society

Return Completed Application to:

NH Fire Prevention Society

c/o Events Your Way

PO Box 237

Whitefield, NH 03598

Questions Contact: Nancy Kilbride, Events Your Way @ eventsyourway@comcast.net

Or register on line and pay by credit card: www.nhfps.org

Thank You for Your Support!