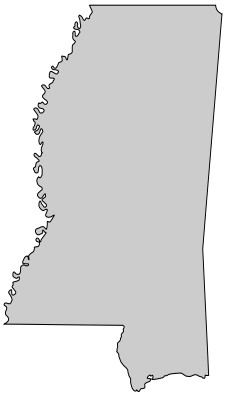

MISSISSIPPI FIRE INVESTIGATORS ASSOCIATION

APPLICATION FOR MEMBERSHIP

RETURN TO:

M.F.I.A./Lisa Jones
711 Camp Dantzler Road
Hattiesburg, MS 39401

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 **Thirty Five Dollars ($35.00**) **with this application**. This includes twenty five dollars ($25.00) annual dues and ten dollars ($10.00) processing fee. All information given by me is warranted to be true.

PERSONAL: Name _____ _____
Firs MI Last

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

Home Phone:_____

E-Mail Address_____

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:_____