

**EAST TEXAS ARSON INVESTIGATORS ASSOCIATION**

**P.O. BOX 4271**

**Longview, TX 75606**



**APPLICATION FOR MEMBERSHIP**

I hereby make application for membership in the East Texas Arson Investigator Association in accordance with its By-Laws and Constitution, and agree to be bound therewith.

Type of Membership (Check one below)      FEES: (Check one below)    \$25.00 Initial Membership [ ]  
ACTIVE      [ ]      \$15.00 Yearly Renewal      [ ]  
ASSOCIATE [ ]

**PLEASE TYPE OR PRINT**

Name: \_\_\_\_\_

Employer: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Business Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Job Title/Position: \_\_\_\_\_ Email: \_\_\_\_\_

Law Enforcement Status:    Regular [ ]    Reserve [ ]    (check one)

Fire Department Status:    Paid    [ ]    Volunteer [ ]    (check one)

Other Classification: \_\_\_\_\_

NEW MEMBERS ONLY: T-Shirt Size: (S-2XL) \_\_\_\_\_

\_\_\_\_\_  
APPLICATION SIGNATURE

\_\_\_\_\_  
DATE