

FIRE INVESTIGATORS STRIKE FORCE MEMBERSHIP APPLICATION



Please accept my application for membership into the Fire Investigators Strike Force, training group, in accordance with its constitution and bylaws. I understand that upon acceptance by the membership, a submission of \$100.00 (or the amount required to cover the months up to the end of the fiscal year) for annual dues will be required.

(Please fill out completely)

Date of Application: _____

Department / District / or Agency Information

Name of department/District or Agency _____

Address / City / State / Zip _____

Phone Numbers (s) _____

Main Investigator Contact: _____

E-Mail Address: _____

(NOTE: If there are more than five investigators, please duplicate this form.)

Rank / Name: _____

Specialty Training _____

Certification through _____

Rank / Name: _____

Specialty Training _____

Certification through _____

Rank / Name: _____

Specialty Training _____

Certification through _____

Rank / Name: _____

Specialty Training _____

Certification through _____

Rank / Name: _____

Specialty Training _____

Certification through _____

Documentation of Certification Level for each investigator must be submitted at the time of application.

Approval of the Chief of the Department/Agency

Name _____

Signature _____

Please send applications to: **Fire Investigators Strike Force**

C/O Ed Kofoed

Send application to: strikeforceboard@gmail.com