ARIZONA FIRE DISTRICT ASSOCIATION
MEMBERSHIP APPICATION

FIRE DISTRICTS

Dues are from January 1 – December 31

Regular Member Dues* $ _____

**Fire District dues are calculated based on secondary assessed values within the District as set by the County Assessor for the prior year. Please call for dues amount.*

District Name: _____

Contact Person: _____

County: _____

Physical Address: _____

Mailing Address: _____

City/State/Zip: _____

Phone Number: _____

Fax Number:_____

Email: _____

Website:_____

Year Formed: _____

FIRE CHIEF/BOARD MEMBERS

Fire Chief:_____

Board Member Name/Title: _____

Board Member Name/Title: _____

Board Member Name/Title: _____

Board Member Name/Title: _____

Board Member Name/Title: _____

DISTRICT DATABASE INFORMATION

Area Sq. Miles Fire: _____

Area Sq. Miles EMS: _____

# of Fire Calls: _____

# of EMS Calls: _____

# of Other Calls: _____

Employee's Paid: _____

Employee's Volunteer: _____

Employee's Reserve: _____

Ambulance: [ ] None [ ] Charge [ ] No Charge [ ] Contract

Legislative District: _____

Population Served:_____

Year Formed: _____

Budget: $ _____

Assessed Valuation: $ _____

Tax Rate: _____

FDAT received: $ _____

Return completed application and dues payment to

AFDA

PO Box 723

Lakeside, AZ 85929

Phone: 1- 480-496-4331

PAYMENT INFORMATION

[ ] Check # _____

[ ] Visa/ MC/ Amex # _____ Exp: _____

Name on card: _____

Signature: _____