



MAYSVILLE VOLUNTEER FIRE COMPANY

Po Box 434

Maysville, WV 26833

www.maysvilleco200.com

Phone (304) 749-7731 Fax (304) 749-8087



Chief Shawn Kimble

President Michael Rohrbaugh

ASSOCIATE MEMBER APPLICATION

NAME _____ DATE _____

ADDRESS _____ PHONE _____

CITY _____ STATE _____ ZIP CODE _____

DATE OF BIRTH _____ SOCIAL SECURITY # _____

As an **Associate Member** you agree to the following:

- All **Associate Members** must be 18 years of age or older.
- All **Associate Members** have to submit \$2 per year (\$1 for dues, \$1 for insurance)
- No **Associate Member** shall be able to fight fire, and the company does not buy gear for them.
- No **Associate Member** can ride on or operate any fire equipment.
- No **Associate Member** shall be able to vote or hold an office.
- No **Associate Member** shall be issued a key.
- The company reserves the right to amend the preceding rules for **Associate Members** at any time.

SIGNATURE _____ DATE _____

PRESIDENT SIGNATURE _____ DATE _____

CHIEF SIGNATURE _____ DATE _____