

REINSTATEMENT MEMBERSHIP APPLICATION

National Association of Fire Investigators

857 TALLEVAST ROAD, SARASOTA, FL 34243, USA

FOR OFFICE USE ONLY: No. _____ Date: _____ Approval: _____ Payment: _____ Source: _____

I hereby make application for membership in the NATIONAL ASSOCIATION OF FIRE INVESTIGATORS and agree to be governed by its Constitution, By-Laws, and Rules.

I am of the opinion that I meet the requirements for membership: A representative of government or of a governmental agency and any representative of a law enforcement agency or fire department, an insurance company, an adjuster, or an employee of a business or industrial concern who is actively engaged or whose interests are concerned with the investigation, control, suppression, or prevention of fires, explosions, subrogations, or kindred and related occurrences is eligible for membership or application provided such person meets other qualifications of character and fitness as decided by the Board of Governors.

APPLICATION MUST BE COMPLETED IN FULL.

Name: _____

(First)

(Middle)

(Last)

Name as You Wish It to Appear on NAFI Records: _____

Date of Birth _____/_____/_____ Place of Birth: _____

(Month) (Day) (Year)

(City/ Town, State/ Province & Country)

Your Current Title(s): _____

Company Name: _____

Nature of Business: _____

Name and Title of Immediate Supervisor: _____

Number of Years and Months at Present Company: _____ Description of Duties: _____

CHECK PREFERRED MAILING ADDRESS: BUSINESS OR HOME

BUSINESS Address/Street: _____

(City/ Town)

(State/ Province)

(Zip/ Postal Code)

(Country)

Telephone: (_____) _____ Fax: (_____) _____

Email Address: _____

HOME Address/Street: _____

(City/ Town)

(State/ Province)

(Zip/ Postal Code)

(Country)

Telephone: (_____) _____ Fax: (_____) _____

Email Address: _____

My NAFI membership number was _____. I became a CFEI on ____/____/____. I became a CFII on ____/____/____.

I have never been convicted of a felony. I qualify as one of the following: Attorney, Fire Fighter, Law Enforcement Officer, Government Employee, Insurance Claims person, Adjuster, Military Personnel, Engineer, Chemist, Metallurgist, Fire Investigator, Laboratory Analyst, or I am involved in some phase of the investigation, control, suppression, or prevention of fires and explosions or the legal trials which may result from this activity.

Signature of Applicant _____ Date _____

One year's dues must accompany this application \$45.00 U.S. Funds for general membership or \$55.00 US Funds for certified membership.

* Please Note - Purchase Orders Not Accepted

Visa or MasterCard # _____ Exp. Date _____ CVW # _____ Billing Zip Code _____

Card Holder Signature _____ Card Holder Name _____

OR Make checks payable to: National Association of Fire Investigators (NAFI)

Mail application with dues to:

National Association of Fire Investigators

857 Tallevast Road, Sarasota, Florida 34243, USA

1-877-506-NAFI or (941) 359-2800 Fax (941) 351-5849

NATIONAL ASSOCIATION OF FIRE INVESTIGATORS (NAFI)

857 Tallevast Road, Sarasota, Florida 34243,USA

1-877- 506-NAFI or (941) 359-2800

www.NAFI.org and www.NAFI921.com

Dear Fire/Explosion Investigation Professional:

This correspondence acknowledges your recent request to have your professional membership reinstated in the National Association of Fire Investigators.

As you are probably already aware, the National Association of Fire Investigators has become the recognized leader in the field of fire and explosion investigation and analysis through its sponsorship of international, national and regional professional training and education programs.

Through its National Certification Board, the National Association of Fire Investigators administers the Certified Fire and Explosion Investigator (CFEI), Certified Fire Investigation Instructor (CFII) and Certified Vehicle Fire Investigator (CVF) certification programs. These programs serve to recognize and document the knowledge, training, education and experience of qualified investigators and instructors.

Your choice to reinstate your membership is evidence of your own personal commitment to increasing your professional knowledge and improving your analytical skills as a fire and explosion investigator and analyst.

To facilitate your request for reinstatement, please complete the following application for membership that will allow us to update your membership records and return it with the appropriate dues (\$45.00 for general membership or \$55.00 for Certified membership).

Should you have any further questions, please feel free to contact us.

Sincerely,

National Association of Fire Investigators