

NATIONAL ASSOCIATION OF FIRE INVESTIGATORS 4900 Manatee Ave. West, Suite 104, Bradenton, FL 34209 1-877-506-NAFI 1-941-242-2323

LIFE MEMBER APPLICATION

FOR OFFICE USE ONLY: No	Date:	Date: Approval:	
Life Members in the National will retain all other benefits o			e exempt from paying dues and be issued.
	asked to provide verification pted membership in good s		
	APPLICATION MUST BE	COMPLETED IN FULL	
Name:			
(First)	(Mic	ddle)	(Last)
Date of Birth:			
(Month)	(Day) (Yea	r)	
MAILING ADDRESS:			
Address/Street:			
(City/ Town)	(State/ Province)	(Zip/ Postal Code)	(Country)
Telephone: ()	Email Address	:	
My NAFI membership number	r is I b	ecame a NAFI member or	n
Members are not exempt fro	m CFEI Recertification and ls, if applicable. I understan	I must recertify by my did that my Life Members	n NAFI. I understand that Life ue date to continue to use the hip will become effective upon r dues previously paid.
Signature of Applicant		Date	

Mail or Fax Application: National Association of Fire Investigators 4900 Manatee Ave. West, Suite 104 Bradenton, Florida 34209 USA

1-877-506-NAFI or (941) 242-2323 Fax (941) 201-4547