**2024 County Association Membership Dues**

Amount: $200.00

New Membership ❒ Membership Renewal ❒

***Qualifications:***

*Any county officer shall be eligible as a County Member.*

County Association Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip:

Phone: \_\_\_\_ Ext. Fax: \_\_\_\_\_\_\_

Association Email: \_\_\_\_

Name: \_\_\_\_\_\_\_\_ Title: **President**

President’s Email: \_\_\_\_ \_

UFC Certification #: \_\_\_\_\_\_ UCC License #: \_\_\_\_\_\_

Are you a member of ICC? ❒ Yes ❒ No ICC Membership #: \_\_\_\_\_\_\_\_

If you are an ICC member do you wish to declare N.J.F.P.P.A. as your primary ICC Chapter? ❒Yes ❒No

Name: \_\_\_\_\_\_\_\_\_\_ Title: **Vice President**

Vice President Email:

UFC Certification #: \_\_\_\_ UCC License #: \_\_\_\_

Are you a member of ICC? ❒ Yes ❒ No ICC Membership #: \_\_\_\_\_\_\_

If you are an ICC member do you wish to declare N.J.F.P.P.A. as your primary ICC Chapter? ❒Yes ❒No

Name: \_\_\_\_\_\_\_\_\_\_ Title: **Secretary**

Secretary Email: \_\_\_\_\_\_

UFC Certification #: \_\_\_\_\_ UCC License #: \_\_\_\_\_\_

Are you a member of ICC? ❒ Yes ❒ No ICC Membership #: \_\_\_\_\_\_

If you are an ICC member do you wish to declare N.J.F.P.P.A. as your primary ICC Chapter? ❒Yes ❒No

Name: \_\_\_\_\_\_\_\_\_\_\_\_ Title:  **Treasurer**

Treasurer’s Email: \_\_\_\_\_

UFC Certification #: \_\_\_\_\_\_ UCC License #: \_\_\_\_\_\_

Are you a member of ICC? ❒ Yes ❒ No ICC Membership #: \_\_\_\_\_\_

If you are an ICC member do you wish to declare N.J.F.P.P.A. as your primary ICC Chapter? ❒Yes ❒No

Name: Title: **Sergeant of Arms**

Email:

UFC Certification #: UCC License #:

Are you a member of ICC? ❒ Yes ❒ No ICC Membership #:

If you are an ICC member do you wish to declare N.J.F.P.P.A. as your primary ICC Chapter? ❒Yes ❒No



***Association Office Use - Do Not Fill In***

Voucher/PO #: Check #: Date Received:

Date Approved: Database Posted ❒

Revised 02/22/2024