

Miller Place Exempt Fireman's Association, Inc.

12 Miller Place Road

Miller Place, New York 11764

631 473 7788 ext. 408

Email: MPFDBENEVOLENT@gmail.com

James Hay
Vice President

John Diffley
President

Brian Dillon
Financial Secretary

Joe McCrain
Trustee

Carol Hawat
Trustee

MEMBERSHIP APPLICATION

Name: _____ Date of Birth: _____ Date _____
Address: _____ City: _____ State: _____ Zip: _____

Hereby make application for Membership in the above association

I am an active member of the Miller Place Fire Department and have served _____ years. I also have never been expelled or removed form any other exempt association fire company or department. If elected to membership I agree to abide by the By-Laws of said association.

Beneficiary Information

Primary Beneficiary

Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip: _____

Contingent Beneficiary

Name: _____ Phone: _____
Address: _____ City: _____ State: _____ Zip: _____

Application Received with Initiation Fee

Active \$15.00

Non-Active Exempt \$15.00

Active Exempt \$15.00

Check# _____

Approval for Membership

Financial Secretary _____

Checks should be made to Miller Place Benevolent Association