



www.ncprescribedfirecouncil.org

Membership Form

Name: _____

Job Title: _____

Agency: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Phone: _____

MEMBER REGISTRATION: Annual Dues (August 1, 2011- July 31, 2012): \$ 10 _____

OR

Lifetime "Spark" Membership Dues (August 1, 2011- Lifetime): \$100 _____

Please complete this form and mail with your check made out to: "**NC Prescribed Fire Council**".

**NC Prescribed Fire Council
PO Box 37434
Raleigh, NC 27627**