

**RETIRED FIREFIGHTERS ASSOCIATION
MEMBERSHIP APPLICATION**

 New Member **Renewal**

Name _____ **Date** _____

Address _____ **Date of Birth** _____

City _____ **State** _____ **Zip+4** _____

Spouse's Name _____

Home Phone _____ **Cell Phone** _____

Date Appointed _____ **at company** _____

Date Retired _____ **from Company and rank** _____

E-Mail Address _____

To receive RFA E-mails go to our website www.dcrfa.com scroll to the bottom of the page and fill out the online form.

Mail this application with dues of \$40.00 made out to RFA to the R.F.A Membership Secretary

**Stefan Ventura
6317 Rockhurst Rd.
Bethesda Md. 20817**

Any questions or comments

(H) 301-530-0106

(C) 301-461-4816

srventura@aol.com

R.F.A. meets on the first Monday of each month @ 11:00 Hrs. except July, August, and September at:

Local 36 Kenny Cox Building
3002 12 St. N.E. Washington D.C. 20017

**R.F.A. MEMBERSHIP DOES NOT INCLUDE RETIRED MEMBERSHIP IN LOCAL 36.
TO BECOME A RETIRED MEMBER OF LOCAL 36 CALL 202/635-8500**