

CFM Membership Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Fax: () _____ Cell: () _____

Email: _____

Profession: _____

Type of Membership

General Membership \$45.00 Annually

Founder's Club \$100 Annually

Life Membership \$500 (one time)

Tax Free Donation Amount: _____

Donation made in the name of:

California Fire Museum (CFM)

34681 Calle Fortuna Ave, Capstrano Beach, CA 92624

Phone: (949) 493-8718 Fax (949) 493-0444

Email: info@CaliforniaFireMuseum.org