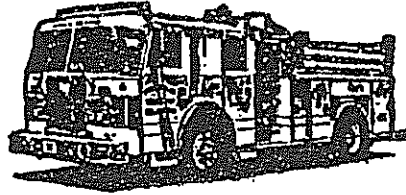


FRANKLIN TOWNSHIP VOL. FIRE CO. #1



2440 FAIRYLAND ROAD - LEHIGHTON, PENNSYLVANIA 18235

APPLICATION FOR MEMBERSHIP

I (full name) _____, AGE _____, DO HEREBY
APPLY FOR MEMBERSHIP IN THE FRANKLIN TWP. VOLUNTEER FIRE CO.

ADDRESS: _____

DATE OF BIRTH: _____ SOCIAL SECURITY # _____

PHONE # _____

TYPE OF MEMBERSHIP (check one) SOCIAL _____ ACTIVE _____ AUXILARY _____

PROPOSED BY: _____ INITIATION FEE _____

DUES _____

IN CASE OF REINSTATEMENT ADD FEE _____

TOTAL _____

INVESTIGATING COMMITTEE

1. _____ 2. _____ 3. _____

ELECTED OR REJECTED TO MEMBERSHIP _____ 20__ FIN. SEC. _____

Annual Dues \$3.00
Initiation Fee \$1.00