

# Application For Membership



**Sacramento Fire Buff Club, Inc.**  
**P.O. Box 13862**  
**Sacramento, CA 95853-3862**  
**Phone: (916) 332-7300**  
**sacfirebuffclub@netzero.net**

Name \_\_\_\_\_ Birth Month: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. No. \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_ Birth Month: \_\_\_\_\_

Children Under 18 Living In The Same Household  
\_\_\_\_\_

Receive newsletter by: E-mail  or Mail

I'm interested in working with the Canteen Service - Yes  No

Membership Dues are \$20.00 and include family members listed above

MAIL TO: **Sacramento Fire Buff Club, Inc.**  
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