



# OHIO FIRE CHIEFS' ASSOCIATION MARCH MADNESS 2024

## MEMBERSHIP DRIVE



# 50% OFF

Join our team! The Ohio Fire Chiefs' Association is offering 50% off your initial membership to the Association. Applications must be received by March 31, 2024. New members who join in March 2024 will be entered into a drawing to win a 2024 OFCA Annual Conference Registration!

The OFCA is an active, powerful organization that works for the benefit of Ohio's fire and emergency services and development of its officers. We provide the resources that every one of our 1,800+ members need to succeed.

### MEMBERSHIP CATEGORIES:

**INDIVIDUAL:** Chiefs, Deputy Chiefs, Assistant Chiefs, Shift Commanders, Duty Officers, or other individuals in similar positions in organized fire departments of political subdivisions, or such other persons designated as Chief of departments in industrial, military, or other not-for-profit fire organizations under contract with political subdivisions as approved by the Board of Directors.

INDIVIDUAL - ~~\$100~~ **\$50**

DEPARTMENTAL - ~~\$100~~ **\$50**

**DEPARTMENTAL:** Not-for-profit fire/EMS departments serving populations of 10,000 or less, which are operated by a political subdivision or are under contract with a political subdivision. Departmental members shall be entitled to the same privileges as an individual Member with the exception of serving in an elected position. Dues for the Departmental Members shall be the same as for Individual Members and the department shall designate the individual voting on its behalf.

CORPORATE - ~~\$90~~ **\$45**

**CORPORATE:** Persons, firms, and corporations engaged in the sale or manufacture of fire apparatus, equipment, devices, or general fire department supplies are eligible. Such members shall be entitled to all privileges of the Association, except the right to vote or hold elective office.

TITLE & NAME:

DEPARTMENT:

TYPE OF DEPARTMENT:  CAREER  COMBINATION  VOLUNTEER

ADDRESS:

CITY, STATE, ZIP CODE:

PHONE NUMBER:  EMAIL:

BOARD MEMBER TO RECEIVE CREDIT FOR THIS MEMBERSHIP:

PAYMENT INFORMATION: 

Name on Card _____	Exp. Date _____
Card Number _____	3 Digit Code _____