

Jersey F.O.O.L.S.
Fraternal Order of Leatherheads Society
****Membership Application Form****
(Print Legibly)

**** Date of Application: _____ ****

Name/Rank: _____
(Rank MUST be included)

Home Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

Email Address: _____

Fire Department Name: _____
(List ONLY the Fire Department you want on your Membership Card)

Membership Fees: \$10.00 Donation to FOOLS International
\$20.00 Membership Fee to Jersey FOOLS
\$10.00 Jersey FOOLS Chapter Coin

Total Due with application: \$40.00

Please Make Check or Money Order Payable to: JERSEY F.O.O.L.S.

Mail To:

David Krouse
316 Riverside Avenue
Rutherford, NJ 07070