



Our goal is to assist the Townsend Volunteer Fire Department and the communities they serve.

PLEASE PRINT LEGIBLY

FRIENDS OF TOWNSEND FIRE MEMBERSHIP FORM	
NAME	
ADDRESS	
TOWN	
STATE	
ZIP CODE	
EMAIL	
PHONE	
TEXT	

By completing this membership form, I certify that I am 18 years of age or older and will abide by all the Association Bylaws and rules.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Friends of Townsend Fire will not share, sell or distribute the information on this form.

Email : [FOTF@friendsoftownsendfire.org](mailto:FOTF@friendsoftownsendfire.org)

Website : [www.friendsoftownsendfire.org](http://www.friendsoftownsendfire.org)

Facebook : [Friends Of Townsend Fire](https://www.facebook.com/FriendsOfTownsendFire)

Donations, questions and/or to return your membership form:

Friends of Townsend Fire

PO BOX 129

Townsend, WI 54175