



Brigade Participation Form

For any changes that happen within your brigade, please send an updated form to the office office@firefighters.org.nz

Brigade Name

Please list below the names of persons that your Brigade wishes to pay contributions form membership to the NZ Firefighters Welfare Society: Only financial named persons of this fire brigade can participate in this offer.

1.	2.
3.	4.
5.	6.
7.	8.
9.	10.
11.	12.
13.	14.
15.	16.
17.	18.
19.	20.
21.	22.

Signed CFO

Signed Secretary

Date

Approved By NZ Firefighters Welfare Society _____