

APPLICATION FOR SUPPORTING MEMBERSHIP

GRATWICK HOSE CO., INC.

110 Ward Road
North Tonawanda, NY 14120

As a candidate for supporting membership in the Gratwick Hose Co., Inc., we the officers and membership of said company would like to take this opportunity to acquaint you with some of the duties and obligations you must assume as a supporting member of our company.

The supporting membership must assist the Gratwick Hose Co., Inc., in all endeavors except active firefighting. Supporting members must work the number and type of functions per year, as stated in the Company By-Laws.

Supporting members also must be active in the cultivation and promotion of friendly relations and moral and intellectual improvement in this community.

We extend to you, as a candidate for Supporting Membership in the Gratwick Hose Co., Inc., our hand in welcome. Please don't accept it however, unless you are ready, willing, and able to live up to the involved in fulfilling our purpose.

Date _____ Telephone _____

1. Name _____
(Last Name) (First Name) (MI)

2. Address _____
(Apt No)

3. _____
(City, Town, Village) (State) (Zip Code)

4. How long have you resided at the above address? Years _____ Months _____

5. How long have you been a resident of New York State? Years _____ Months _____

6. Are you 30 years of age or older? Yes ___ No ___ If no, state your age. _____

7. What is your date of birth? _____

8. What is your social security number? _____

9. What is your Email address? _____

10. Is additional information about a change in your name or your use of a nickname or an assumed name necessary to enable a check on your eligibility for membership? Yes ___ No ___ If yes, please explain in the space provided for additional information.