

2022 ACTIVE MEMBERSHIP

Please make any changes to the information below for verificompany Name:	ication purposes.
Contact Full Name:	
Email Address:	
Website:	
Telephone Number:	
Address:	
City/State/Zip:	
OSFM Extinguisher License Number:	License Types:
If you have CLSB or OSFM System License please list them be	elow:
CSLB License Number:	_License Types:
OSFM System License Number:	_License Types:
How would you like to receive the newsletter? Demail Description: The APP Descriptio	
ACTIVE Membership (E License Concerns) Deduct \$25 from your membership fees if paid	
Up to 750,000 Annual Industry Related Sales	
From 750,000 to 2,000,000 Annual Industry Related Sales	
☐ More than 2,000,000 Annual Industry Related Sales	\$4/5
VOLUNTEER CONTRIBUTION FOR POLITICAL ACTIONS	(CH :
□ \$100 □ \$250 □ \$500 □ \$1,000 or	\$ (fill in your amount)
Paying in full on this check (payable to CALSAFE)	and the state of the state
☐ Please bill me for the PA contribution spread over 12 mo (on contributions of \$500 or more)	ontnly installments
Note: While your membership is considered a non-profit donused for industry political activity and is therefore not considered.	
TOTAL ENCLOSED \$	

RENEW MEMBERSHIP ONLINE AT www.calsafe.com

Or mail completed application with dues to:

CALSAFE

950 Glenn Drive, Suite 150, Folsom, CA 95630