

2024 ACTIVE MEMBERSHIP

Please make any changes to the information below for verific	cation purposes.
Company Name:	
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? ☐ Email	☐ Mail
2024 ANNUAL MEMBERSHIP DUES (PLEASE CHECK THE APPROPRIATE LINE)	
ACTIVE Membership (E License Concerns)	
☐ Up to 750,000 Annual Industry Related Sale	\$ 395 after 4/1 \$420
☐ From 750,000 to 2,000,000 Annual Industry Related Sale	\$ 525 after 4/1 \$550
☐ More than 2,000,000 Annual Industry Related Sale	\$600 after 4/1 \$625
VOLUNTEER CONTRIBUTION FOR POLITICAL ACTIONS	
	\$ (fill in your amount)
 Paying in full on this check (payable to CALSAFE) 	
 Please bill me for the PA contribution spread over 12 mo (on contributions of \$500 or more) 	nthly installments
Note: While your membership is considered a non-profit done used for industry political activity and is therefore not consider	
TOTAL ENCLOSED S	

RENEW MEMBERSHIP ONLINE AT www.calsafe.com

Or mail completed application with dues to:

CALSAFE

3620 American River Drive, Suite 230 Sacramento, CA 95864