FAIRFAX PUBLIC ACCESS

2929 Eskridge Rd., Suite S, Fairfax, VA 22031
571-749-1102 - www.fcac.org

MEMBERSHIP APPLICATION

Annual Membership Fees

Fairfax County Member or Out of County Member annual fee …….$26.00
Proof of residency required in the form of a driver's license, a passport, any state or government issued ID, or a utility bill. If mailing in this form please enclose a copy of one form of identification.

GET STARTED TODAY!

MEMBERSHIP INFORMATION

PLEASE USE CAPS ONLY, THANK YOU

First Name

Last Name

Address

City/State/Zip

Home Phone

Work Phone

Mobile Phone

Email

☐ *By joining FPA I agree to follow all the member policies & procedures as stated in the FPA Operations Manual. I understand that copies of this manual are available at the station for pick-up and/or online at fcac.org.*

☐ *Please email me FPA information & news*

Please check the type of membership:

☐ **Fairfax County Member $26.00** - *(I hereby certify that my home residence is within the boundaries of Fairfax County, Fairfax City, or Falls Church City).*

☐ **Out-of-County Member $26.00** - *(I hereby certify that my home resident is not within Fairfax County).*

Method of Payment:

☐ **Cash** ☐ **Check** ☐ **MasterCard** ☐ **Visa**

FOR OFFICE USE ONLY
Received:_____ Exp. Date_____
Entered: _____ By:_____
☐ New Member ☐ Renewal

Staff Signature: _____