



OFFICE USE ONLY:

Rec'd by:

Pay Date:

Dufur FireMed Annual Enrollment Form (Offline Version)

Online Enrollment is Available at www.dufurfiremed.com

Even with medical insurance, the expense of ambulance rides are rarely covered in full. By becoming a Dufur FireMed Member, you don't need to worry about the cost of ambulance rides and what your medical insurance will or will not cover. Also, if you work or play outside of Dufur, you will receive the same benefits in 50 other regions throughout Oregon, including in The Dalles, Hood River, Moro, Maupin and more.

Your \$60 annual membership fee stays in Dufur. All funds received go toward training and equipment for the local service. This helps the all-volunteer Dufur EMS team provide quality pre-hospital care and transportation.

NEW: Your membership provides coverage for all persons who are permanent residents of the same single-occupancy, non-commercial residence. All memberships expire at the end of the calendar year, at which time all members will be invited to renew their membership for the next year.

NOTE: This Dufur FireMed membership DOES NOT include LifeFlight Air transportation.

Return this application with the membership cost of \$60 (check made out to Dufur Volunteer Ambulance or cash) to Dufur City Hall or mail to: Dufur Volunteer Fire & Ambulance, PO Box 145, Dufur, OR 97021

Primary Member Name:	DOB:
Mailing Address:	Physical Address:
City, State, Zip:	City, State, Zip:
Primary Phone:	Email:
Spouse Name:	Spouse DOB:
Perm. Resident 1 Name:	Perm. Resident 1 DOB:
Perm. Resident 2 Name:	Perm. Resident 2 DOB:
Perm. Resident 3 Name:	Perm. Resident 3 DOB:
Perm. Resident 4 Name:	Perm. Resident 4 DOB:
Perm. Resident 5 Name:	Perm. Resident 5 DOB:
List the full names and DOB of any additional permanent residents that live in your household:	