2025 CENTRAL OHIO RETIRED FIREFIGHTERS - 4-UNIT **MEMBERSHIP**



MEMBER INFORMATION

Membership Type:	Firefighter S	urviving Spouse		
Full Name:		Date Retired	Department	Rank (Opt)
Street Address:		City, State, Z	ip:	
Telephone #:	Date of Birth:	Email Address:		
Spouse's Name:		E-Mail:		
Telephone #:	Date of Birth:			

DUES

ITEM	AMOUNT	TOTAL	Instructions:	
4-Unit Dues - C.O.R.F.	\$10.00 / Year	 Make check payable to: 4-Unit C.O.R.F Payment amount should be for combined dues plus the options selected. Please do NOT send an extra large envelope. First year for DROP members and new retirees is 		
PFRO (State) Dues	\$30.00 / Year			
Donation - 4-Unit News	Optional			
Decals - 4-U-Unit	\$1.00 / Each		free. Members achieving Life Status do not need to pay	
Decals - P.F.R.O.	\$1.00 / Each		dues.	
Roster Book (2025-2026)	\$5.00 / Each		4-Unit C.O.R.F Mail To: PO Box 340853 Columbus, OH 43234	
	Total Paid			

NOTES:

By using this application, you do not have to pay any other dues. PFRO dues will be sent on your behalf.

Please enclose a self-addressed stamped envelope with your application or your Membership Card and/or Decals will NOT be mailed back to you.

Roster Books ordered will be sent out in a separate mailing from a different address.

**Your dues are due each year on/before January 1st

Please complete all information as legible as possible so the Roster is correct. You will receive periodic update emails from 4-Unit if you provide your current email address.