Fire Chaplains of Maine Association

Form: FCA-4

Purposes

To bring together in resource, training, and common endeavor for those persons who serve as Fire Chaplains in the State of Maine

To render such spiritual, moral and psychological support to the members of the fire and rescue personnel as shall assist them to better carry out their duties and responsibilities.

To assist the victims of fire, calamity and natural disaster by providing a level of interim pastoral care until such time as conventional ministries can attend to their needs.

To foster cooperation , fairness, fellowship and safety on both the local and broader levels of the Fire and Rescue Services.

Affiliation

The FCMA is a division of the Maine Fire Chiefs' Association. In most cases the Chaplain's annual dues (\$86.00) are paid by the Department(s) served (Check with your Chief).

Membership

Membership in the FCMA is open to all who are involved in the fire rescue chaplaincy. We have some members who are full-time chaplains, but most of us are either part-time/volunteer clergy, laity or fire/rescue department members.

Qualifications

Must be appointed as a Fire Department Chaplain by the local Chief. Must be endorsed by his/ her religious body:

Clergy=Proof of ministerial standing in the State of Maine.

Laity=Proof that you are under denominational/religious body jurisdiction.

Membership Application

(Please type or print)

| Name: | Last | First | Middle Initial |
|--|---|--|---------------------------------|
| Address: | | rnst | whome munai |
| | House/PO Box No. | | Street/Road |
| | City/Town | | Zip |
| Telephone: C | Office: | Home: | |
| Fire Station:_ | Email: | Fax: | |
| Charge Depa | artment(s): | | |
| | Department Name | Departm | nent Name |
| | Mailing Address | Mailing | ; Address |
| | Chief's Name | Chief' | s Name |
| Are y Type | Manning: Full Time_ rou a Firefighter? Yes_ Chaplaincy: Full Time Appointed Chaplain_ | No How many e Part Time Cal | years? l Volunteer |
| Prior Chapla Are you: Ord | incy Experience? lained Clergy Licer | nsed/Ordered Laity_ | Yrs Laity |
| | | Place Ordained, Licensed | |
| Your Religiou | ıs Affiliation | Denomina | |
| Level membe | ership Desired: Active (Active memb | Associate | become a MFCA member) |
| Signature o | f Applicant: | | _ Date: |
| Mail comple | | embership Review Co Rev. Dan Coffin 1754 Main Road Phippsburg, ME 0456 | |
| Letter conLetter ofThis formAssociati | de the following with nfirming appointment endorsement/standing with a dues check for on (MFCA) ed MFCA application f | your application: with your Department g by an Ecclesiastical : \$86.00, payable to M | nt Body aine Fire Chiefs' |