

# BIGGERSVILLE FIRE & RESCUE

## APPLICATION FOR MEMBERSHIP

*Please print all information clearly.*

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CELL PHONE: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ CELL PROVIDER: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ DRIVER LICENSE #: \_\_\_\_\_ STATE: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ POSITION: \_\_\_\_\_

CONTACT IN CASE OF EMERGENCY (NAME): \_\_\_\_\_

CONTACT IN CASE OF EMERGENCY (ADDRESS & PHONE): \_\_\_\_\_

HAVE YOU EVER WORKED IN EMERGENCY SERVICES? (*Fire, Medical, Police, etc...*)  YES  NO

IF YES, EXPLAIN AND LIST TRAINING: \_\_\_\_\_

\_\_\_\_\_

DO YOU HAVE ANY PHYSICAL IMPAIRMENT?  YES  NO

IF YES, EXPLAIN: \_\_\_\_\_

DO YOU HAVE A CRIMINAL RECORD?  YES  NO SHIRT SIZE: \_\_\_\_\_

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I ATTEST THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED IS TRUE TO THE BEST OF MY KNOWLEDGE. IF ACCEPTED FOR MEMBERSHIP, I AFFIRM TO OBEY ALL LAWFUL ORDERS OF THE OFFICERS AND ALL STANDING ORDERS AND PROCEDURES OF THIS DEPARTMENT. I WILL PERFORM TO THE BEST OF MY ABILITY ALL OF THE DUTIES PRESCRIBED TO ME. I AUTHORIZE AND RELEASE MY PROVIDED PERSONAL INFORMATION TO BE USED TO PERFORM A CRIMINAL BACKGROUND CLEARANCE BY THE OFFICERS OF THE DEPARTMENT AND WISH IT TO BE ONLY RELEASED IN THE CASE OF AN EMERGENCY. I WILL SURRENDER ANY AND ALL EQUIPMENT ISSUED TO ME UPON LEAVING THE DEPARTMENT, WHETHER BY VOLUNTARY OR INVOLUNTARY MEANS. PERSONS LEAVING THE DEPARTMENT THAT FAIL TO RETURN ANY AND ALL EQUIPMENT WITHIN 14 DAYS OF LEAVING THE DEPARTMENT WILL BE SUBJECT TO PROSECUTION TO THE FULLEST EXTENT OF THE LAW.

Approved: _____	Disapproved: _____	Chief's Int.: _____
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SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_