



VOLUNTEER FIRE COMPANY FRANKLIN TWP CARBON COUNTY PA. Volunteer Membership Application

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date of Birth	Social Security No.		
Referred By			
Type of Volunteer	SOCIAL <input type="checkbox"/>	ACTIVE <input type="checkbox"/>	AUXILIARY MEMBER <input type="checkbox"/>
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain
Have you ever been convicted of a misdemeanor or a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>

MEMBERSHIP COST	
One Time Initiation fee	\$ NOT APPLICABLE
Annual Dues	\$ 5.00
TOTAL	\$5.00

DISCLAIMER AND SIGNATURE
<p>FRANKLIN TWP PA Fire Department is committed to the concept and practice of equal opportunity for membership and achievement without discrimination because of race, color, religion, national origin, sex, handicap, age, sexual orientation, political affiliation, status as a protected veteran, or any characteristic against which discrimination is prohibited by applicable law.</p> <p>I certify that my answers are true and complete to the best of my knowledge.</p> <p>If this application leads to membership, I understand that false or misleading information in my application or interview may result in my release.</p>

Signature

Date

2440 Fairyland Road, Lehighton, Pennsylvania 18235, United States

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