

**Webster Volunteer Fire Department**  
**5122 Main St/PO Box 4**  
**Webster, IN 47392**  
**(765) 935-1585**

**Application for Membership**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

DOB: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ PSID Number : \_\_\_\_\_

Address: \_\_\_\_\_ Years at this

Address: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Number of dependents (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_

High School: \_\_\_\_\_ Highest Level of

Education: \_\_\_\_\_

Please list any additional education, training or certification pertinent to the fire

service: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Current Employer: \_\_\_\_\_ Years at this Employer: \_\_\_\_\_

Previous Employment (Please list previous 2)

Employer: \_\_\_\_\_ Dates: \_\_\_\_\_

Employer: \_\_\_\_\_ Dates: \_\_\_\_\_

Military Experience: \_\_\_\_\_ Previous Fire Service Experience: \_\_\_\_\_

Driver's License or ID # and State Issued from: \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_ If so please

explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you discussed your desire to become a member of the Webster Township Fire Department with your spouse (if applicable) **Yes/No** and if so do they understand the responsibilities and sacrifices including extensive time away from home to fulfill your duties including required trainings, meetings and community events? **Yes/No**

Please explain in your own words why you wish to become a member of the Webster Township Fire Department:

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Do you have any physical or mental disabilities or illnesses that would impair you from fulfilling your duties and responsibilities as a member of the fire department including intensive physical and emotional demands, extensive time on your feet, lifting and holding heavy objects, witnessing tragedy and prolonged exposure to extreme weather conditions? Yes/No If yes, please explain:\_\_\_\_\_

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Applicant signature:\_\_\_\_\_ Date:\_\_\_\_\_

**Below is for office use only:**

Date Received:\_\_\_\_\_ Date of interview:\_\_\_\_\_ Date of Chief's interview:\_\_\_\_\_