

REDDING FIRE & EMS COMPANY #1
APPLICATION FOR MEMBERSHIP

Dear Applicant:

Thank you for considering joining Redding Fire & EMS Co. #1. Being a member of the volunteer department is a challenging and rewarding position. Although you spend a lot of time training for the various jobs we perform there is no better feeling than knowing you have helped others when they are in need.

Hard work is not the only part of being a volunteer. We have many other activities throughout the year in which members may participate. These include dinners, picnics, parades and community services. The department is a great place to meet new friends while participating in a long-standing traditional volunteer avocation.

Any person wishing to become a member of REDDING FIRE & EMS Co. #1 must at the time of application, meet the following criteria:

1. Must be a minimum of 18 years of age (16*)
2. Must be a citizen of the United States or be a legal permanent resident.
3. Must have a High School diploma, its equivalent, or be an active student.

All applicants will go before a review/investigating committee. References are checked and applicant's criminal history is verified. Applicant's names are presented to the full department membership and then voted upon by the active and life members present at that meeting. A one year probationary period will follow after which the department will vote on full membership.

Should you have any questions please contact us at (203) 938-2520 or stop in our firehouse on Black Rock Turnpike.

Sincerely,

Sean McKenney

Sean McKenney
Chief

*Any minor between the ages of 16 and 18 may apply for membership with parental consent and will remain under probation with limited and restricted activities until age of majority in accordance with Connecticut State Statue Section 31-23 and 31-23-1 and/or stated in the Company By-Laws.

REDDING FIRE & EMS COMPANY #1

186 Black Rock Turnpike
P.O. Box 185
Redding Ridge, CT 06896
APPLICATION FORM (Revised 05-05-2020)

New Member Existing Member Update or Change Add

Effective Date:	Status: <input type="checkbox"/> Active <input type="checkbox"/> In-Active
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Last Name:	First Name:	MI:
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Address:	City:	State:	Zip:
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Date of Birth:	SSN:
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Home #	Cell #	Email:
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Drivers License #:	Exp Date:	Type:
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Emergency Contact:	Relationship:	Ph #
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Blood Type:	Last Medical Exam Date:	Dr.
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Employer:	Ph #
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TRAINING INFORMATION

Please attach copies of all training certificates, licenses (including DL) and SSN Card.

Status: New Member Re-instated Resigned Terminated or

<input type="checkbox"/> Dual Member with:	Authorized to Drive Apparatus: <input type="checkbox"/> Yes <input type="checkbox"/> No
DL Copy Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No	R-50: <input type="checkbox"/> Yes <input type="checkbox"/> No
SSN Copy Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No	Engine 1: <input type="checkbox"/> Yes <input type="checkbox"/> No
Workers Comp Acknowledgement Form Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No	Engine 2: <input type="checkbox"/> Yes <input type="checkbox"/> No
Insurance Beneficiary Designation Form Attached: <input type="checkbox"/> Yes <input type="checkbox"/> No	Tanker 4: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Utility 3: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Join Date:
	Current Rank:

Verified by Chief:	Date:
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REDDING FIRE & EMS COMPANY #1

186 BLACKROCK TURNPIKE REDDING, CT 06896 203-938-2520

Applicant Records Check

Have you ever been convicted of a crime? _____ If yes, when _____

If yes, please attach an explanation and note attachment _____

Address:	City:	State:	Zip:
Date of Birth:	SSN:		
Home #	Cell #	Email:	
Drivers License #:	Exp Date:	Type:	

I hereby authorize Redding Fire & EMS Company #1 to check any and all records pertaining to criminal convictions and Driver License information.

Signature Date Signature of Sponsoring Member Date

Understanding

I understand that: A) The information that I have provided may be verified, if necessary, by contacting persons or organizations referenced in this application, or by contacting any person or organization that may have information concerning me. B) A criminal back ground check may be requested on me. C) I hereby release and agree to hold harmless from liability any person or organization that provides information. D) I also agree to hold harmless that Company, it's officers, employees, and members thereof. E) In signing this application, I acknowledge and attest that I have read the attached information and apply for membership in Redding Fire & EMS Co. #1. I further agree to comply with the By-Laws, Rules, and Regulations of the Company. I affirm that the information I have given on this application is true and correct.

Application for Membership

Personal References:

Please list the Names, Addresses, and Telephone numbers of three references that may be contacted by the Membership Committee:

1. _____

2. _____

3. _____

Underage Applicants:

If you are applying for membership and have not yet reached the age of 18, Please provide Parental Consent:

Printed full name: _____
Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Date

Participation Guidelines for Underage Applicants

What activities are permitted (at the discretion of the Chief).

- 1) Attending participating in adult supervised training.
- 2) Wearing Personal Protective Equipment (PPE) or a uniform that identifies him/her as a cadet, explorer, or similar.
- 3) After receiving proper training, responding to emergencies on emergency apparatus.
- 4) Participating in functions within the rehabilitation area.
- 5) Picking up equipment and performing cleanup at the scene after the Incident Commander has declared the area safe.
- 6) Fighting brush fires (no standing timber) upon receiving proper training.
- 7) Performing search and rescue/lost persons recovery operations, not including structural firefighting.
- 8) During training only, using pneumatic/power driven saws, shears, "Hurst" type, or other power tools.
- 9) Entering the interior of a fire structure after the fire has been extinguished and the Incident Commander has declared the structure safe.
- 10) Setting up uncharged attack lines exterior to the structure and changing SCBA bottles at emergency scenes.
- 11) Operating pumps, less than 300 gallons per minute at an emergency scene and handling charged hose lines up to 1 3/4" diameter.

- 12) Taking Emergency Medical Responder (EMR) or Emergency Medical Technician (EMT) course.
- 13) Marine/boat rescue training activities.
- 14) Upon certification from the state of Connecticut, performing EMS-related duties, vital signs, patient care during transportation, and providing oxygen. Any minor must be under direct supervision of an EMS provider who is over 18 and of equal or higher EMS certification level.

What activities are prohibited:

- 1) Driving any vehicle in emergency mode.
- 2) Performing interior fire suppression involving structures, vehicles or wild land fires, except grass fires.
- 3) Operating a personal vehicle with blue lights.
- 4) Performing firefighting overhaul duties.
- 5) Responding to hazardous materials fire, spills, or other events that may expose him/her to a toxic hazardous material exceeding a threshold limit value listed in tables of section 1910.1000, Subpart Z of 29 CFR 1910 (allows small motor vehicle fuel leaks).
- 6) Performing any activity involving the use of self-contained breathing apparatus (except training performed by qualified personnel. And only after medical certification as required by 29 CFR 1910.134.
- 7) Entering a confined space as defined in 29 CFR 1910.146
- 8) Performing offshore ice rescue activities.
- 9) Performing any duty involving the risk of falling a distance of six (6) feet or more, including the use of ladders.
- 10) Filling air bottles.
- 11) Using cutting torches
- 12) Operating aerial ladders.
- 13) Performing any duties that involve the use of hose lines greater than 2 ½" (except 5-6" suction line during drafting operations.
- 14) Marine rescue activities, except in training situations.
- 15) Providing traffic control on public highways.

Attest:

I have read the above noted permitted and restricted activities and agree to participate with Redding Fire & EMS Co. #1 under these guidelines:

Signature of Applicant

Date

Signature of Parent or Legal Guardian

Date