

Fleetville Volunteer Fire Company of Benton Township

P.O. Box 6, 58 Firehouse Lane, Fleetville, PA. 18420 info@fleetvillefireco.com • fleetvillefireco.com Emergency Phone Number 911 • Non-Emergency Phone (570) 945-3139

Member Application

Last:	_First:		MI:
Address:			
City:	Sta	te:	_ Zip:
Home Phone:	E-Mail:		
Mobile Phone:	Carrier:		
Date of Birth:/Driver License	:	SS #:	
List any physical or medical limitations that would services member? (Example: back problems, hea		•	•
Who should be contacted in case of emergenc	:y?		
Name:	Relation	onship:	
Home Phone:	Mobile Phone:		
Are you interested in becoming: (Please Checl	k)		
□ Active Member □ Social Member			
Do you have any previous experience in Emer Firefighting, Emergency Vehicle Operator Course, services training that you may have and provide c	, EMT, or Firefighter I. Pleas	se list all em	ergency medical

Name:	Phone:	
Address: City:	State:	Zip:
Name:	Phone:	
Address: City:	State:	Zip:
Name:	Phone:	
Address: City:	State:	Zip:
Parental Consent: If the applicant is under 18 years of age, applicant mu I, give my son or daughter permission to join the Fleetville Volunteer Fire Company of Benton Towns daughter must obtain working papers if under the age of 16. If you have all contact the Fleetville Volunteer Fire Company at (570) 945-3139.	hip. I understand	that my son or
Parent/Guardian Signature:	Date:_	
Criminal History		
Have you ever been convicted of a misdemeanor? Check One. □ Yes □ N	lo	
Have you ever been convicted of a felony? Check One. □ Yes □ No		
Have you ever been convicted of an offense that constitutes a crime of "ar pa.C.S. § 3301 or any similar offense under any Federal or State law. I ur false statement herein, I am subject to penalties described by law, includi Check One. Yes No	nderstand that if I	knowingly make a
By signing below, I hereby certify that the above information is true and act Volunteer Fire Company of Benton Township to conduct an investigation in Police Department, State Police, FBI, or any other recognized law enforce held in confidence by Fleetville Volunteer Fire Company of Benton Townshand references provided on this application may be verified by the Fire Chorganization and that Federal Laws prohibit age discrimination. If for any recheck I will not be considered as an applicant of the Fleetville Volunteer Files By signing below, you declare all the above answers are true to the best of understood that any false statement on this application is sufficient cause. An initial membership fee of \$15.00 will be collected on the date of this application declared criminal background check and \$5.00 will pay for your apprefundable. Dues are \$5.00 per year there after your application year.	nto my backgrount ment agency. All hip. I understand hief and/or Preside reason I do not paire Company of Bour knowledge for rejection or diplication. \$10.00	and through the local information will be that all information ent of the ass said background enton Township. It is smissal. of this fee will pay
Signature:	Date:	

Date:_