



FLINT HILL VOLUNTEER FIRE AND RESCUE COMPANY, INC.
COMPANY 4
APPLICATION for MEMBERSHIP
(Please print. All fields required.)

Applicant Information

Name: _____ Date of Birth: ____/____/____
Last First MI

Street Address: _____

City: _____ State: _____ ZIP Code: _____

Mailing address (if different from street address): _____

City: _____ State: _____ ZIP Code: _____

Phone #: _____ Alternate Phone #: _____

Email address: _____

Citizenship: _____ Last 4 digits of Social Security Number: _____

Driver's License State: _____ Driver's License #: _____

Junior Membership Parent or Legal Guardian Approval
(Complete only for applicants ages 16-18)

Parent Signature: _____ Parent Printed Name: _____

Parent Phone Number: _____

Medical Information

Do you have any physical or medical conditions or illnesses that might prevent your full participation in Company 4 activities? YES / NO

If YES, please explain.

Personal References

Please provide three-character references unrelated to you.

Name: _____ Phone number: _____

Address: _____

Name: _____ Phone Number: _____

Address: _____

Name: _____ Phone Number: _____

Address: _____

Experience

Have you ever been a member or employee of another fire or rescue organization? YES / NO

If YES, list organization(s).

If YES, have you ever been removed from or refused membership in the above company(s) or any other fire or rescue organization? YES / NO If YES, please explain.

Do you currently hold any of the following Fire/Rescue Emergency services certifications? (circle all that apply.)

- | | |
|----------------|---|
| CPR | Paramedic |
| Firefighter I | Emergency Vehicle Operator I / II / III |
| Firefighter II | Driver Pump Operator |
| Officer I / II | Hazmat Awareness of Operations |
| EMT- Basic | |

Do you have any of the following FEMA Incident Command System certifications? (circle all that apply)

- ISC- 100 ICS-200 ICS-700 ICS-800

Please list any other experience, paid or volunteer, that you feel might benefit Flint Hill Volunteer Fire & Rescue. *Examples include but are not limited to: accounting, grant writing, fundraising, food preparation/cooking, facility cleaning, lawn & grounds maintenance, organizational skills, medical care experience, etc.* Please know that Company 4 encourages all who qualify and who are willing to volunteer their time to apply.

Background Information

Are you an active or separated member of the US military? If separated, was the separation under other than honorable circumstances? YES / NO / NOT APPLICABLE

Have you ever had your vehicle driver’s license suspended or revoked? YES / NO If YES, please explain:

Have you ever been arrested for any violation other than minor traffic violations? YES / NO If YES, please provide date and explain.

Acknowledgement

I acknowledge:

- If I am elected to Company 4, it will be on a 6-month probationary basis after which time the Board of Directors and/or membership committee of the Company will make a recommendation to the membership who will vote on permanent membership status.
- If I am elected to probationary membership status, I shall be expected to comply with all Company 4 by-laws or risk an extended probationary period or loss of membership.
- My attendance will be required at Company 4 activities, resulting in periodic demands upon my time.
- All operational members are expected to regularly attend scheduled training.
- A background check and driver’s license check are required for all applicants.

The undersigned applicant agrees to indemnify and hold harmless Company 4, its officers and directors and employees, from any consequence resulting from this application and the revelation of any information therein, including but not limited to any third-party actions claiming injury based on this application and the revelation of any information therein. Further, applicant agrees to indemnify and hold harmless sources of information regarding the applicant, including but not limited to references and other fire and rescue organizations and their members.

Applicant Signature: _____ Date: _____