

# APPLICATION FOR EXPLORER POST 560

Name F \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_

Age \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex M \_\_\_ F \_\_\_

Parent or Guardians Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Present Grade \_\_\_\_\_ School You Attend \_\_\_\_\_

Graduated Yes \_\_\_\_\_ No \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Emergency Contact \_\_\_\_\_

Emergency Contact Phone Number \_\_\_\_\_

Reason For Joining The Fire Explorers

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By Signing this application means you are aware of the dangers of firefighting and the dangers in the training exercises that are done to promote firefighting and fire safety. Also your signature means you agree to abide by the rules and regulations set by the instructors of Post 560 at all times.

Sign and Date \_\_\_\_\_

Parents or Guardians \_\_\_\_\_

Mail completed application to:

Gaston County Firefighter's Association  
Attn: Harry Field  
P.O. Box 433  
Dallas, NC 28034