

1<sup>ST</sup> Reading\_\_\_\_\_

2<sup>nd</sup> Reading\_\_\_\_\_

Accepted            Not Accepted

**WARREN VOLUNTEER FIRE COMPANY, INC**

**APPLICATION FOR MEMBERSHIP**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

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

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

TYPE OF MEMBERSHIP: ACTIVE \_\_\_\_\_ ASSOCIATE \_\_\_\_\_ AFFILIATE \_\_\_\_\_ JUNIOR \_\_\_\_\_

CURRENT DRIVER'S LICENSE STATE/NUMBER: \_\_\_\_\_

Have you ever had your license suspended in this, or any other state? (If yes, please provide details)

\_\_\_\_\_

Have you been convicted of a felony with in the last five years? (If yes, give dates and details of convictions)

\_\_\_\_\_

WVFC Member Sponsor signatures (Obtained by Applicant):

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

(By signing as a Sponsor, you are supporting this applicant whom would be a good member for the WVFC)

I (applicant) certify that the above information is correct and that I agree to abide by the WVFC bi-laws and SOP's. I authorize the WVFC to verify the foregoing statements, and I understand that false statements are grounds for immediate dismissal from the WVFC.

All new members of the WVFC will be considered probationary members for a period of six months. Background checks will be standard for all applications. SSN# may be requested for background checks.

All ACTIVE applicants' will submit a current (within 6 months) physical form and have an interview with the Fire or Ambulance Chief before the second reading.

\_\_\_\_\_

Applicants' Signature

\_\_\_\_\_

Parent Signature (Junior Member)