

Ferndale Volunteer Fire Company, Inc.

Application for Membership

An initiation fee of ten dollars plus the first year's dues of ten dollars must accompany this application. Applications will not be processed by the Membership Committee until the initial fee and first year's dues are paid.

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City & ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_ S.S. Number \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Driver Lic. # \_\_\_\_\_ State \_\_\_\_\_ Class \_\_\_\_\_

Beneficiary \_\_\_\_\_ Relationship \_\_\_\_\_

Ben. Address \_\_\_\_\_ Ben. City & ZIP \_\_\_\_\_

Ben. Phone \_\_\_\_\_ Ben. Phone 2 \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Emp. Address \_\_\_\_\_ Emp. Phone \_\_\_\_\_

City & Zip \_\_\_\_\_ Time Employed \_\_\_\_\_

Are you now or have you ever been a member at another fire company? Yes  No

If "Yes", reason for leaving \_\_\_\_\_

Name of fire company \_\_\_\_\_

Address \_\_\_\_\_ City & Zip \_\_\_\_\_

Have you ever been arrested or convicted of a crime? Yes  No

If "Yes", list the reason \_\_\_\_\_

List Fire or EMS Training  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Application for Membership - Part 2

Why do you want to join Ferndale Volunteer Fire Company?

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Check the training indicated below in which you have interest(s).

Fire Suppression

Emergency Medical Services (EMS)

You must understand that in order to become an active responding member of this company you must attend and complete the required training provided at no cost by the Anne Arundel County Fire Department. In some instances, depending upon the availability of classes it may take up to one year before you have satisfied the requirements to respond to fire and/or EMS incidents.

You must also understand that you are expected to attend the monthly meetings of this company on the first Thursday of the month at 8:00 PM in the station hall. You are also required to work one of the company's fundraiser events, either BINGO or Teen Dance. Failure to satisfy these requirements is cause for suspension or termination of your membership.

If you apply to become an active responding member of this company, you must complete a physical examination, mandatory drug test and fingerprinting as required by Anne Arundel County Fire Department. These requirements are provided at no cost to you.

I understand the requirements as stated above and hereby submit my application for membership for consideration by the Membership Committee.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent / Guardian Signature (If under 18) \_\_\_\_\_

Date of interview _____	Approved	YES	NO
If disapproved, cite reason for disapproval			
_____			
_____			
_____			