

Cottekill Fire Company

JUNIOR MEMBERSHIP APPLICATION

DATE ___/___/___

To the Junior Firefighter Program Committee of the Cottekill Fire Company:

I, the undersigned, hereby make application to become Junior Member of the Cottekill Volunteer Fire Company, agreeing to abide by it's By-Laws, Rules and Regulations.

I certify that I am a Citizen of the United States of America and Reside in the Cottekill Fire District, Ulster County, NY.

I hereby certify that all information is complete and correct. I understand that the Fire Chief may verify any and all information contained in this application. I further understand that any false data supplied may be considered grounds for expulsion.

Signed: _____ Sponsor: _____

PERSONAL DATA

EDUCATIONAL INFORMATION

Name: _____

Grade Level: _____

Address: _____

School: _____

City, State, Zip _____

Guidance Counselor: _____

Home Tel: # _____

Phone # : _____

Date Of Birth ___/___/___ Ht: _____

Driver Lic: ST. ___ # _____ Class _____

Soc Sec # _____

Alias and/or Nickname: _____

Racial Appearance: _____

Skin Tone: Light Medium Dark

Place of Birth (city, county, and state/country)

Medical History i.e.: (Allergies, Medications, Heart Condition)

ADDITIONAL INFORMATION

List any Firematic or EMS training you have had including Locations and Dates: _____

List any hobbies, special skills, or interests that may be of value to the fire company: _____

In Case of Illness or Injury Please Notify

Name: _____

Address: _____

City, State, Zip: _____

Phone # : _____ Relationship: _____

Applicants Name Last: _____ First: _____ Middle Initial: _____

PARENT / GUARDIAN RELEASE

I the undersigned hear-by grant my permission for my child, _____, to make application to the Junior Firefighter Program of the Cottekill Volunteer Fire Company. I understand my child will be participating in activities such as Firefighter Training, Fire Station and Apparatus cleaning and maintenance checks, as well as Fundraising and Miscellaneous Activities.

In consideration of the benefits to be derived from participation in the Junior Firefighter Program, any and all claims against the Cottekill Volunteer Fire Company, or against the officers, employees, agents, or other representatives of them, or any other persons working under their direction or engaged in the conduct of their affairs, arising out of any accident, illness, injury, damage, or other loss or harm to/or incurred or suffered by the applicant named above or to his or her property, in connection with or incidental to the Cottekill Volunteer Fire Company activities, including preliminary training and travel, are hereby expressly waived by the applicant and the applicant's family or guardians.

Parent/Guardian Signature: _____ Date: _____

FOR OFFICIAL USE ONLY

The Junior Firefighter Program Committee of the Cottekill Fire Company reports on the above applicant as follows: _____ Favorable

Committee Chairperson

Committee Member

Committee Member

Program Advisor

Back Ground Check Completed: ___/___/___ Initials: ___ Results Returned: ___/___/___ Initials: _____
Comments: