

## Deep Creek Volunteer Fire Company Application for membership

**Applicants Name:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Do you have a valid driver's license?** \_\_\_\_\_ **State issued?** \_\_\_\_\_ **What Class?** \_\_\_\_\_

**Do you have experience as a truck driver?** \_\_\_\_\_  
If yes, explain \_\_\_\_\_

**Do you have any physical limitations?** \_\_\_\_\_  
If yes, explain \_\_\_\_\_

**Current or most recent employer** \_\_\_\_\_  
Phone number: \_\_\_\_\_

**Do you have experience as a Fire Fighter?** \_\_\_\_\_  
If yes, what department? Are you still a member? \_\_\_\_\_

**Do you have any certifications as a Fire Fighter?** \_\_\_\_\_  
If yes, state issued? \_\_\_\_\_ List certifications: \_\_\_\_\_

**Do you have any Emergency Medical Training?** \_\_\_\_\_  
If yes, State issued? \_\_\_\_\_ List Certification: \_\_\_\_\_

**Are you a college student?** \_\_\_\_\_  
If yes, what college are you attending? \_\_\_\_\_

**What skills or talents do you have that may benefit this company?** \_\_\_\_\_

**If you do not have a Maryland or National fire fighting certification, do you agree to attend and pass the next available fire fighter 1 class offered as part of you one year probation?** \_\_\_\_\_

**Do you agree to attend and pass the next available hazardous materials class offered as part of your one year probation?** \_\_\_\_\_

**In accordance with the Maryland Fire and Rescue Institute, NFPA standards, and this company, do you agree to have the approved medical clearance physical performed within 6 months of your acceptance date?** \_\_\_\_\_

Along with this application you must provide a \$10.00 application fee and \$1.00 for your first year's dues.

If accepted into membership of the Deep Creek Volunteer Fire Company, I agree to abide by the By-laws and the Standard Operating Procedures (S.O.P.'s) set forth by this company and pay my annual dues of \$1.00 by December 1<sup>st</sup> of each year. I also understand that I will be on probation for the term of one year, and at the end of that year I will be evaluated by the three Chief Officers of this company for extended membership. If accepted into membership, I understand that I can not belong to another fire department in Garrett County. If I fail to keep my membership status, I agree that I will return any issued fire company property. I understand that upon my acceptance, any actions that I take or do that reflect negatively upon the Deep Creek Volunteer Fire Company, I will be held accountable for by the Chief Officers and Board of Directors of this company.

By signing this document, I fully understand this document and certify that all information is true to the best of my knowledge.

**Applicants Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Received by/ Sponsor:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Date voted on:** \_\_\_\_\_ **Accepted:** \_\_\_\_\_ **Denied:** \_\_\_\_\_