

# Membership Application

## North Garden Volunteer Fire Company



Legal Name \_\_\_\_\_  
(First Middle Last)

Date of Birth \_\_\_\_\_ Preferred Name \_\_\_\_\_  
(Month, Day, Year)

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Home Address \_\_\_\_\_ Distance to Firehouse \_\_\_\_\_  
(Miles)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Work

Education \_\_\_\_\_ Occupation \_\_\_\_\_

Health \_\_\_\_\_

Physical Disabilities \_\_\_\_\_

Previous Fire or EMS Experience \_\_\_\_\_

Relevant qualifications, skills, and certifications \_\_\_\_\_

Resident of North Garden area since \_\_\_\_\_ Availability  Weekday Day  Weekend Day  
(Year)  Weekday Night  Weekend Night

Membership Type  Full Operational Member (30 hours/month)  Associate Operational Member (15 hours/month)  Associate Support Member (5 hours/month)  Junior Member (Also check type)

Drivers License Number \_\_\_\_\_ Issuing State \_\_\_\_\_ Issue Date \_\_\_\_\_  
(MM/YYYY)

I consent to Criminal History and Sex Offender Registration Search and authorize all information obtained as a result of said search to be provided to the North Garden Volunteer Fire Company, Inc. or its authorized representative.

If accepted as a member: (Initial each line)

- \_\_\_\_\_ I agree to abide by the By-Laws and obey at all times the instructions and orders of the proper "Officer in Charge".
- \_\_\_\_\_ I understand that during my probationary period of one year, I am expected to acquire as much training as possible.
- \_\_\_\_\_ I understand that my membership is contingent upon a successful background check and medical clearance.
- \_\_\_\_\_ I understand the required time commitment for my membership type and agree to meet that commitment.

Signature of Applicant \_\_\_\_\_ Application Date \_\_\_\_\_  
(MM/DD/YYYY)

Sponsors \_\_\_\_\_  
(Print) (Sign) (Print) (Sign)

Application Recieved _____ <small>(MM/DD/YYYY)</small>	Application Voted _____ <small>(MM/DD/YYYY)</small>	<b>Administrative Use Only</b>
Application Presented _____ <small>(MM/DD/YYYY)</small>	Vote Result <input type="checkbox"/> Accepted <input type="checkbox"/> Rejected	
Signature of President _____		Date _____