



APPLICATION FOR MEMBERSHIP

OLD FORD VOLUNTEER FIRE DEPARTMENT
6150 Hwy 17 N. Washington, NC 27889
252-975-3128

Date: _____ Position Applying For: _____

(Junior FF, Medical Responder, Firefighter or Officer (Chief, Deputy Chief, Captain, Lieutenant, Safety Officer, Administrative Assistant))

Name: _____ Date of Birth: _____ Age: _____

Phone #: _____ Email: _____

Address: _____

Social Security Number: _____ Drivers Lic. # _____

Have you ever been convicted of a misdemeanor or a felony? Yes No

If yes, please explain: _____

List other fire, military or related civic groups you are or have been associated with and years of service: _____

List any fire and or ems training you have and attach copies of training certificates if applicable. _____

Applicant signature: _____

Officer receiving application: _____ Date: _____

References

Name: _____

Address: _____

Phone: _____ Email: _____

Relationship: _____

Best way/ time to contact: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Relationship: _____

Best way/ time to contact: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Relationship: _____

Best way/ time to contact: _____