

Answering the following 2 questions is optional

HEALTH STATUS: (circle one) GOOD FAIR POOR

LIST ALL CURRENT HEALTH RELATED PROBLEMS: (cardiac, diabetes, back, etc.) _____

ALL NEW APPLICANTS WILL BE REQUIRED TO OBTAIN A FIREFIGHTERS PHYSICAL AT THE APPLICANTS EXPENCE BEFORE MEMBERSHIP WILL BE CONSIDERED.

HAVE YOU HAD A RECENT PHYSICAL? _____ WHEN? _____

NOTE: failure to attend three (3) consecutive monthly meetings or three (3) regular drills without proper excuse automatically terminates your apprenticeship.

NOTE: You will be expected to complete SCENE SUPPORT and CPR course during your apprenticeship year.

You will also be expected to participate in all fundraisers and parades.

I hereby certify that the above information is correct and consent to having these facts researched by the membership committee.

(Applicant Signature)

(Date)

Membership Committee initials: _____ APPRENTICESHIP START DATE: _____

REVISED 9/2004