



CONCORD TOWNSHIP FIRE DEPARTMENT, INC.

Application for Membership

(Please type or print)

NAME _____

ADDRESS _____ TOWNSHIP _____

CITY _____ STATE _____

HOW LONG A RESIDENT OF CONCORD TOWNSHIP? _____

PHONE NO. _____

HAVE YOU EVER APPLIED OR BEEN A MEMBER OF ANY FIRE DEPT? _____

(1) FROM _____ TO _____ HIGHEST RANK _____

LOCATION _____

REASON FOR LEAVING _____

(2) FROM _____ TO _____ HIGHEST RANK _____

LOCATION _____

REASON FOR LEAVING _____

LIST ANY OTHER RELATED EXPERIENCE OR TRAINING _____

LIST TIME AVAILABLE FOR FIRE DUTY

SUNDAY FROM _____ M. TO _____ M.

MONDAY FROM _____ M. TO _____ M.

TUESDAY FROM _____ M. TO _____ M.

WEDNESDAY FROM _____ M. TO _____ M.

THURSDAY FROM _____ M. TO _____ M.

FRIDAY FROM _____ M. TO _____ M.

SATURDAY FROM _____ M. TO _____ M.

IN CASE OF GENERAL FIRE ALARM CAN YOU BE CALLED FROM WORK? _____
IF YES, WORK PHONE NUMBER _____ AND LIST DAYS AND HOURS
WORKED AND NAME OF EMPLOYER _____

ARE YOU BETWEEN THE AGES OF 21 AND 65? _____

IF NOT STATE YOUR AGE _____

DO YOU HAVE ANY PHYSICAL, MENTAL OR MEDICAL IMPAIRMENTS OR ANY USE
OF ALCOHOL OR DRUGS WHICH WOULD INTERFER WITH YOUR ABILITY TO
PERFORM THE DUTIES AS A VOLUNTEER FIREMAN FOR THE CONCORD
TOWNSHIP FIRE DEPARTMENT? IF YES, PLEASE LIST.

DO YOU OWN AN AUTOMOBILE? _____ MAKE _____ YEAR _____

DO YOU HAVE A VALID INDIANA DRIVERS LICENSE? _____

TYPE OF LICENSE _____

PLACE OF ISSUE _____

EXPIRATION DATE _____

RESTRICTIONS _____

DO YOU HAVE AUTOMOBILE LIABILITY INSURANCE? _____

ATTACH CERTIFICATE OF INSURANCE VERIFYING SUCH COVERAGE.

WITHIN THE LAST FIVE YEARS:

1. HAVE YOU EVER BEEN DENIED ISSUANCE OF A LICENSE? _____

2. HAVE YOU EVER HAD A LICENSE SUSPENDED OR REVOKED? _____

3. HAVE YOU EVER BEEN DENIED AUTOMOBILE INSURANCE? _____

4. HAVE YOU EVER HAD CAR INSURANCE DENIED OR REVOKED? _____

IF YOU ANSWERED YES TO ANY OF THE ABOVE FIVE QUESTIONS, EXPLAIN IN
FULL (DATES AND DETAILS) _____

BY SIGNING THIS APPLICATION YOU AGREE TO THE FOLLOWING:

You understand that your appointment to Concord Township Fire Department, Incorporated, depends upon the voting membership of the department, and when you are voted on and passed you will be placed on the waiting list as the filling date of your application appears in the secretaries records.

While on the waiting list you are NOT entitled to the privileges of the department. Only after you have become a probationary and/or a full member of the Concord Township Fire Department, Inc. and have received a membership card signed by the CHIEF, the Secretary will assign you a badge and a key with corresponding numbers, then and only then will you become a member of the Concord Township Fire Department, Inc. at which time you may install the regulation Blue Light and Concord Township Fire Department, Inc. insignia on your automobile.

Also you agree that if you resign, or for any reason you may be dismissed from the department, you will immediately return your membership card and your badge and key presenting them in person to the Secretary and that you will remove the blue light and other insignia from your automobile receiving a receipt from the Secretary for that effect.

You agree that the badge assigned to you is the property of the department and if lost you will endeavor to recover it so that it will not fall into the hands of a person who is not a member of this department.

That any false statement made in this application is grounds for dismissal.

If appointed to the Concord Township Fire Department, Inc. I agree to uphold the Constitution and by-laws of the said Concord Township Fire Department, Inc. and that I will faithfully perform duties assigned to me.

Signed _____
(Please sign in INK.)

Dated _____ Day of _____ 20 _____

Social Security No. _____