



# Maybrook Engine Company No. 1

## Application for Membership

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ D.O.B. \_\_\_\_\_

Place Of Birth \_\_\_\_\_ S.S.N.# \_\_\_\_\_

Race: White \_\_\_ Black \_\_\_ Hispanic \_\_\_ Other \_\_\_\_\_ Gender: Male \_\_\_ Female \_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Do you have any previous experience in the fire service? Yes \_\_\_ No \_\_\_  
If so, Where \_\_\_\_\_ Date(s) of service \_\_\_\_\_

Have you completed any state firefighting courses? Yes \_\_\_ No \_\_\_  
If so, which courses \_\_\_\_\_

Do have any EMS experience? Yes \_\_\_ No \_\_\_  
If yes, which of the following: CPR/AED \_\_\_ First Aid \_\_\_ CFR \_\_\_ EMT \_\_\_ Other \_\_\_\_\_  
Copies of all Completed Fire/EMS certifications are required for our files.

Have you ever been convicted of a crime? Yes \_\_\_ No \_\_\_  
If yes, please explain: \_\_\_\_\_

Any problems with your license: Yes \_\_\_ No \_\_\_ Class \_\_\_\_\_ License # \_\_\_\_\_  
If yes, Please explain \_\_\_\_\_

Person to be notified in case of an emergency:  
Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

\_\_\_\_\_  
Applicants Signature Date Signed

Maybrook Engine Co. No. 1 is an equal opportunity volunteer fire company. Please join us, make an experience of a lifetime and advance through the ranks.

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Sponsoring member

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Sponsoring member

Interviewed by: \_\_\_\_\_

\_\_\_\_\_

Comments:

Approved: { }      Disapproved: { }

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Signature

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Date

Revised: 2/2011