



Lima Fire Company No.1

1174 W. BALTIMORE PIKE
POST OFFICE BOX 206
LIMA, PENNSYLVANIA 19037

BUSINESS PHONE
(610) 565-3736
FAX NO.
(610) 891-1993
VOICE MAIL
(610) 565-7004

APPLICATION FOR MEMBERSHIP

GENERAL INFORMATION:

NAME _____
(FIRST) (MIDDLE) (LAST)

DATE OF BIRTH _____

SOCIAL SECURITY NUMBER: _____

ADDRESS _____

HOME PHONE _____ WORK PHONE _____

PAGER _____ CELL PHONE _____

DRIVERS LICENSE NUMBER _____ STATE _____ CLASS _____ EXP _____

EMPLOYMENT:

OCCUPATION _____ YEARS EMPLOYED _____

NAME OF EMPLOYER _____

ADDRESS OF EMPLOYER _____

WORK PHONE _____ WHAT SHIFT DO YOU WORK _____

EDUCATION:

ARE YOU STILL IN HIGH SCHOOL _____ IF YES WHAT GRADE _____

NAME OF HIGH SCHOOL _____ ADDRESS _____

HIGHEST GRADE COMPLETED _____ DEGREES/CERTIFICATES _____

MILITARY:

HAVE YOU EVER SERVED IN THE ARMED FORCES _____ IF YES WHICH BRANCH _____

HOW LONG DID YOU SERVE _____ RANK _____ TYPE OF DISCHARGE _____

CRIMINAL RECORD:

HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____ PLEASE EXPLAIN: _____

HAVE YOU HAD ANY TRAFFIC VIOLATIONS IN THE PAST THREE YEARS? _____

PLEASE EXPLAIN: _____

REASON FOR JOINING:

PLEASE BRIEFLY STATE YOUR REASON FOR JOINING: _____

PRIOR FIRE SERVICE:

HAVE YOU EVER BELONGED TO A FIRE OR AMBULANCE COMPANY? _____

IF YES, PLEASE LIST FOR EACH; IF MORE ROOM IS NEEDED CHECK HERE () AND USE THE BACK PAGE.

NAME: _____ ADDRESS _____

PHONE _____ FROM/TO _____

REASON FOR LEAVING: _____

NAME: _____ ADDRESS _____

PHONE _____ FROM/TO _____

REASON FOR LEAVING: _____

PLEASE LIST ALL FIRE AND/OR EMERGENCY TRAINING YOU HAVE TAKEN (PLEASE PRESENT ALL CERTIFICATES AT TIME OF YOUR INTERVIEW): _____

EMERGENCY CONTACT:

NAME _____ RELATIONSHIP _____ HOME PHONE _____

WORK PHONE _____ ADDRESS _____

REFERENCES:

NAME _____ PHONE _____ RELATION _____

NAME _____ PHONE _____ RELATION _____

NAME _____ PHONE _____ RELATION _____

SIGNATURE OF VERIFICATION:

I, THE UNDERSIGNED, HEREBY VERIFY THAT ALL THE INFORMATION IN THIS APPLICATION TO BE TRUE AND ACCURATE. I ALSO REALIZE THAT FALSIFICATION OF ANY INFORMATION CAN BE JUSTIFICATION FOR TERMINATION OF MY APPLICATION OR MEMBERSHIP AT ANY TIME. AND I ALSO GIVE THE MEMBERSHIP COMMITTEE OF THE LIMA FIRE COMPANY PERMISSION TO PERFORM A CRIMINAL BACKGROUND CHECK.

SIGNED _____ DATE _____

APPRENTICE MEMBERS:

I ACKNOWLEDGE THAT I MUST PRESENT THE MEMBERSHIP COMMITTEE WITH A COPY OF MY WORKING PAPERS IN ORDER TO BEGIN RUNNING WITH THE FIRE OR AMBULANCE DIVISION.. I AM ALSO AWARE I WILL BE MADE TO OBEY THE CHILD LABOR LAWS OF THE COMMONWEALTH OF PENNSLYVANIA.

SIGNED _____ DATE _____

LEGAL GUARDIAN /PARENTAL CONSENT:

I, _____ ACKNOWLEDGE THAT AS THE PARENT /GUARDIAN OF _____, I DO HEREBY GIVE MY PERMISSION FOR MY CHILD TO BECOME A MEMBER OF THE LIMA FIRE COMPANY.

SIGNED _____ DATE _____ RELATIONSHIP _____

FOR COMPANY USE ONLY

APPLICATION FEE ATTACHED (Y) (N) AMOUNT _____

WORKING PAPERS ATTACHED (Y) (N)

RECOMMENDED FOR MEMBERSHIP (Y) (N) IF NOT EXPLAIN WHY? _____

DATE OF INTERVIEW: ___/___/___ INTERVIEWED BY: _____

IF WORKING PAPERS WERE NOT ATTACHED, DATE THEY WERE TURNED IN _____