

Middletown Volunteer Fire Company

Station Phone: 301-371-6907
Emergency: 911



P.O. Box 322, Middletown, MD 21769

Application for Membership

Active Responder	Non-Responder	Social
Name:		
Address:		
City:	State:	Zip:
How long have you lived at the address above?		
Home Phone #	Other Phone #	
Email Address:		
Date of Birth		
Drivers license information		
State:	Number:	Class:
Education information		
Name of school		Diploma/Degree
High school:		
College:		
Technical school:		
Employment		
Name of Employer:		
Address:		
Telephone #:		
Supervisor:		
References: Name three persons, not related to you that we may contact. You must have known these people for at least six months.		
Name	Address	Telephone #
1.		
2.		
3.		
Sponsorship: Name and telephone number of two company members or members from another Fire/ EMS company that would sponsor you for membership.		
Name	Signature	
1.		
2.		

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Previous Fire/Rescue organizations

Name	Telephone #
1.	
2.	

Fire/Rescue Training: please list with expiration dates. Please also bring copies of your training records

If you are applying for active status, you will be required to pass a physical examination and drug testing. Do you have any impairment that would interfere with your abilities for perform in emergency situations?

Yes No

Have you ever been convicted of any crimes or traffic violations, if yes please explain.

Yes No

Finally why would you like to join the Middletown Vol. Fire Co.?

Please Read and Sign

I authorize an investigation of all statements contained on this application. I understand that any misrepresentation or omission of any information requested is cause for dismissal, before or after my membership is accepted. I also understand that my membership is for an indefinite time period. If during that time I obtain any company or county property, I will return the property when no longer needed or at the termination of my membership.

Date _____

Signature _____

Printed Name _____

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Parental Permission Slip for Membership

This form is to be signed by the parent or legal guardian of the applicant if under the age of 18 years old, prior to acceptance of membership.

I _____ give permission for my Son/Daughter to become a member of the Middletown Vol. Fire Co. In the case of an accident or injury while performing duties related to Fire/Rescue activities; I will not hold the Middletown Vol. Fire Co. Responsible.

I may at any time revoke my permission by addressing a letter to the president of the company. After such letter is received my child will be suspended until permission is resubmitted or he/she reaches their 18th birthday.

I have authority of my Son/Daughter while he/she is a member until the age of 18.

Name of applicant _____

Applicant's signature: _____

Parent or Guardian signature: _____

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For Membership Committee Use Only

Membership committee Chair:
Applicant contacted Date
Interview Date
Membership committee in attendance
1.
2.
3.
BOD Acceptance Date:
Company Acceptance Date:
First Year's Dues Paid:
Probationary Manual Issued:

The applicant must also have their photo taken and be added to the new member board after their company acceptance. Complete