# Orwigsburg Fire Department Application for Junior Membership

Please complete the entire application. Incomplete applications will be returned to the applicant and will not be considered until completed. Please print legibly or type.

**I. Applicant Information:** 

## Name: \_\_\_\_\_ Address: State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Home Telephone: Cell Phone: Email Address: Date of Birth: \_\_\_\_\_ Age: \_\_\_\_ Signature of Applicant: **II. Parent or Legal Guardian Information:** Father's Name (or Legal Guardian): \_\_\_\_\_ Address: Town: State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: Mother's Name: Address: \_\_\_\_\_ Town: State: Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

#### III. Consents

#### Parental Permission:

I consent to my son or daughter applying for membership as a Junior Firefighter in the Friendship Hose Co. #1, Orwigsburg, Pa. I realize that while the activities of a Junior Firefighter are limited by both the regulations of the Fire Department and by the Laws of the Commonwealth of Pennsylvania, the scene of any emergency is a dynamic and dangerous location. The very presence of Firefighters at an emergency scene and the activities required during the conduct of fire and rescue operations, by their very nature, are subject to great risk, possibly leading to serious injury or death. While every effort is made to provide for the safety of all of our members, no guarantee can be made that my son / daughter will be safe from harm.

Signature of Parent or Guardian:

Print Name of Parent or Guardian:
Criminal Background Check:  I consent to the Friendship Hose Co. #1, Orwigsburg, Pa. conducting a Criminal Background Check of my son or daughter including a review of their driving record as a condition of membership.
Signature of Parent or Guardian:
Print Name of Parent or Guardian:
High School Record:  If he or she is currently enrolled in High School, I consent to the Friendship Hose Co. #1, Orwigsburg, Pa. contacting school officials and confirming that my son / daughter is a student in good standing and has not presented any serious disciplinary problems to the School.
Signature of Parent or Guardian:
Print Name of Parent or Guardian:

## IV. References

Please provide the name, address and phone numbers of three adults who can be contacted to provide a reference for you. Only one of the three may be a relative. References may include adult friends, teachers, coaches, clergy, employer or members of our Department.

Reference	e #1		
Name:			 
Address:			
State:	Z	p Code:	
Telephon	e:		
Reference	e #2		
Name:			 
Address:			
	Z		
Telephon	e:		
Reference	e #3		
Name:			 
Address:			 
State:	Z	p Code:	
	e:		

## The following items must be submitted with your completed application:

- Copy of most recent High School Report Card. Junior members are required to maintain passing grades at all times during the school year. Your application will not be accepted if there are any failing grades on your current report card. Once you are accepted as a Junior Member, you will be required to present your Report Card to the Fire Chief at the conclusion of each marking period. If at any time you have a failing grade on your report card, your membership is suspended for 6 weeks, until the next report is issued confirming that the grade has improved. If you have graduated from High School, a copy of your Diploma must accompany the application.
- Copy of Completed Pennsylvania Work Papers. The Work Papers can be obtained from the High School.
- Copy of Pennsylvania Drivers License

PENNSYLVANIA STATE POLICE					FOR CENTRAL REPOSITORY USE ONLY (LEAVE BLANK)			
REQUEST FOR CRIMINAL RECORD CHECK						•	•	
PART I: TO BE COMPLETED BY REQUESTER (INFORMATION WILL BE MAILED TO REQUESTER ONLY)				QUEST				
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