



APPLICATION FOR MEMBERSHIP REDWOOD VALLEY/CALPELLA VOLUNTEER FIRE DEPARTMENT

PERSONAL INFORMATION

NAME _____ DATE _____

SOCIAL SECURITY

NUMBER _____ AGE _____ BIRTHDATE _____

CA. DRIVERS LICENSE # _____ TYPE _____

ARE YOU A CITIZEN OF THE U.S. ? YES _____ NO _____

PRESENT ADDRESS _____

HOW LONG HAVE YOU LIVED IN THE AREA ? _____

(You must have lived in the Fire District for at least six months to be eligible for membership in the Department).

Do you own property in the Fire District ? YES _____ NO _____

What is the address of that property ? _____

HOME PHONE # _____ WORK PHONE # _____

PHYSICAL DESCRIPTION

HEIGHT _____ ft. _____ inches WEIGHT _____ lbs.

EYE COLOR _____ HAIR COLOR _____

SEX _____

MEDICAL QUESTIONS

Are you or have you been under a physician's care in the last six months ?

YES _____ NO _____ If yes Explain why : _____

You will be expected to undergo a physical examination at the Department's expense, if accepted for membership.

Do you have any medical or physical disabilities that may keep you from performing any of the physical activities of a Firefighter ?

Explain: _____

EMPLOYMENT

Are you presently employed ? YES _____ NO _____

If so, where ? _____ Occupation _____

What is your work schedule ? _____

Employer's phone # _____ Supervisor _____

IN AN EXTREME EMERGENCY, WOULD YOUR EMPLOYER ALLOW YOU TO LEAVE WORK TO RESPOND TO THE FIRE DEPARTMENT TO ASSIST ? YES _____ NO _____

EDUCATION

Total number of school years completed ? _____

Any other additional schools, degrees, certificates, licenses, job skills or other training ? _____

Have you any experience or training in any field related to fire suppression and or medical emergencies ? _____

Would you be willing to attend any special classes or training dealing in the subjects of Fire and Medical or other related subjects ? YES _____ NO _____

U.S. Military Service ? YES _____ NO _____ if yes Years _____ Rank _____

Are you presently in the Reserves or National Guard ? YES _____ NO _____

IN YOUR OWN WORDS, BRIEFLY EXPLAIN WHY YOU WOULD LIKE TO BE A REDWOOD VALLEY/CALPELLA FIRE VOLUNTEER

REFERENCES:

Name _____ Address _____ Phone# _____

Relationship _____ Years Acquainted _____

Name _____ Address _____ Phone# _____

Relationship _____ Years Acquainted _____

Name _____ Address _____ Phone# _____

Relationship _____ Years Acquainted _____

IN CASE OF AN EMERGENCY NOTIFY:

Name _____ Address _____

Phone # _____ Work Phone # _____

Doctors Name _____ Phone # _____