### DUNDEE FIRE COMPANY 12 UNION ST. DUNDEE, NEW YORK 14837

# **MEMBERSHIP APPLICATION PROCESS**

NAME				
OFFICE USE ONLY: DATE SUBMITTED TO DFC				
The following is an application to join the Dundee Fire Company and/or Emergency Squad as a regular member (18+ yrs old) or Provisional Member (16+17 yrs old).				
The way we accept and process an application is as follows:				
Applicant fills out all forms and notes below if they are joining the Fire Company or Emergency Squad, or both.				
The application goes to our investigation committee, which interviews the applicant, attended by parent or guardian if membership is as a Provisional Member.				
The application then is brought before the Fire Company to be voted on.				
Once the application is approved by the members of the Company, the applicant will need a physical examination by his or her own doctor, paid for by the Company.				
When the Company receives the completed physical form, the complete application is then sent to the Yates County Workmens' Compensation board for evaluation and approval.				
From Yates County, the complete application and physical form is brought to the Dundee Village Board for their approval.				
Once approved by the Village Board, the applicant becomes a member of the Dundee Fire Company as a regular or Provisional member.				
Please mark with a check what your interest and status will be:				
FIREFIGHTING				
AMBULANCE SERVICE				
Regular Member (18+ years old)				
Provisional Member (16+17 yrs old)				
- 1 –				

#### DUNDEE FIRE COMPANY 12 UNION ST., DUNDEE, NEW YORK 14837 PHONE 607-243-8441

### APPLICATION FOR MEMBERSHIP IN THE DUNDEE FIRE COMPANY

Na	me				
Date of birth		Age			
1.	I desire to become a member of the Dundee Fire Company and agree to be governed by it's By-Laws and Constitution.				
2.	I acknowledge that the Chief has full control of all members and apparatus of the Department at all fire and drills.				
3.	I agree to obey his orders and those of his assistants.				
4.	<ul> <li>I will respond to all alarms unless prevented by illness, absence from town, or satisfactory excuse.</li> </ul>				
5.	. As a member of the Fire Company in the matter of instructions and drill, I agree to give as much time as the Chief, or his assistants deem necessary to make me a proficient and valuable firefighter/ambulance responder.				
6.	I will attend all company meetings unless excused as per By-Laws of the Company.				
7. If Provisional Member Application: Attach completed working papers and copy of birth certificate					
8.	B. Dundee Fire Company Members Proposing Applicant (two active members):				
	Name	_ Signature			
	Name	_ Signature			
Applicant Signature Date:					
	<u>If Provisional membersh</u>	<u>lip</u> :			
	Parent/Guardian Name				
	Parent/Guardian signature				

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# **MEMBERSHIP APPPLICATION - PERSONNEL RECORD**

\$	Soc. Sec. No		
Full Name	Male	Female	
Address		Dundee, New `	York 14837
Mailing Address (if different)			
Date of Birth	Age	Height _	ftin
Place of birth (city, state)			
Maiden Name (if applicable)			
Driver's Lic. #			
Phone Number			
Employer			
Address of Employer	Phone	e	
Have you ever belonged to a Fire Departn	nent/Organization before	e? Yes	No
If yes, Department/Organization name			
Do you have any limitation which would pu firefighter/ambulance responder (such as			duties of a
Yes No			
If yes, what limitation			
Do you have any Military Service?	YesNo		
If yes, what experience			
Have you ever been arrested?	No		
If Provisional Application: Attach com	npleted Working Paper	s and copy of bir	th certificate
Person to notify in case of emergency:			
Name	Relation	nship	
Address	Phone		
Signed	Parent/Gua	rdian (if Provisiona	al Application)
	Name		
	Signature		

## DUNDEE FIRE DEPARTMENT 12 UNION ST., DUNDEE, NEW YORK 14837 PHONE 607-243-8441

#### **MEMBERSHIP APPLICATION**

#### APPLICANT'S AUTHORIZATION FOR RELEASE OF INFORMATION

In order to confirm the information I supplied on my application for membership in the Dundee Fire Company, I authorize all licensing agencies, educational institutions, law enforcement agencies, present and former employers, and military services to disclose their relevant records about me to the Dundee Fire Company whether the information be of public, private, or confidential nature, and I release these agencies from any liability and responsibility from so doing.

This authorization, in original copy form, shall be valid for this and any future information, reports, or updates that may be requested.

I understand that this form will accompany requests for official documents and confirmations of my credentials.

Applicant's name _		
Signature		Date
	If Provisional Membership	Application:
	Parent/ Guardian Name	
	Signature	
	Date	