

**THE HAMPSTEAD VOLUNTEER FIRE ENGINE
AND HOSE COMPANY, NO. 1**

1341 N. Main Street
P.O. Box 231
Hampstead, MD 21074
410-239-4280

APPLICATION FOR MEMBERSHIP

Any application received incomplete will be returned.

Name: (Last) _____ (First) _____ (MI) _____

Current Address: _____

City: _____ State: _____ Zip: _____

Years at this address: _____ Phone #: (Home) _____ (Work) _____

Previous Address: _____ How Long: _____

City: _____ State: _____ Zip: _____

Social Security Number: _____ - _____ - _____

DRIVERS LICENSE / EMERGENCY CONTACT INFORMATION:

State of Issue: _____ Soundex Number: _____ Class: _____ Exp.: _____

Total Current Points: _____ May we obtain a copy of your driving record? Yes No

Have your driving privileges ever been suspended or revoked? _____ When: _____

If yes, why? _____

Are you a U.S. Citizen? _____ If not, place of origin: _____

Any Alias or Nick-Names: _____

In case of Emergency Contact: _____

Address: _____ City: _____ State: _____

Phone #: _____ Relationship: _____

MILITARY / EMPLOYMENT EXPERIENCE:

Have you ever served in the armed forces? _____ Branch: _____

Type of Discharge: _____ Dates Served: _____ to _____

Current Occupation: _____

Employer's Name: _____ Employee's Supervisor: _____

Employer's Address: _____

City: _____ State: _____ Zip: _____ Phone #: _____

Contact Person: _____ May we contact this person? _____

Work Phone #: _____ Dates Employed: From _____ To _____

Previous Employer: _____ Contact Person: _____

May we contact this person? _____ Phone #: _____

Other than minor traffic offenses, have you ever been convicted of a criminal act, or have any criminal charges pending? _____ If yes, provide explanation _____

EDUCATION EXPERIENCE:

Please circle highest attained: 09 10 11 12 GED AA BD MD DD

Date of Graduation: _____ Name of University or High School: _____

Major: _____

Related training you bring to the company (ex. CPR) _____

List any other organizations you belong to:

(1): _____

(2): _____

MEDICAL INFORMATION:

Height: _____ Weight: _____ Color Eyes: _____ Color Hair: _____

Vision: ____/____ Do you wear glasses or contacts? _____ Blood Type: _____

Are you on any medications? _____ If yes, list types: _____

Do you have or suffer from any of the following conditions? If yes, please comment below:

Allergies Yes No

Mental or Emotional Problems Yes No

Alcohol or Substance Abuse Yes No

Physical Impairments Yes No

Hearing Impairments Yes No

Heart Problems Yes No

Diabetes Yes No

Breathing Problems Yes No

Any other medical conditions not covered above? _____

Date of last physical: _____ Physician's Name: _____ Phone #: _____

REFERENCES:

Please provide the names of three (3) persons whom are not related to you and are not members of the Hampstead Fire Engine & Hose Company #1:

Name Address Phone #

Please provide the names of any fire company personnel you are acquainted with (if any): _____

Are you a member of any other Fire, EMS, or Rescue organization? _____

Career _____ Volunteer _____ List Company: _____

Chief: _____ President: _____

Why are you leaving? _____

Phone #: _____

Have you ever been rejected from this or any other Fire, EMS, or Rescue organization? _____

If yes, explain: _____

GENERAL INFORMATION:

(* Optional)

NOTE: you must be 15 years and 11 months or older to apply. You must be 16 on the night the company votes on your application.

Date of Birth: ____/____/____ Age: _____

*Place of Birth: _____ Sex: _____ *Race: _____ Married: _____

Why do you want to be a member of the Hampstead Fire Engine & Hose Company #1?

All members are expected to actively support company fund raising, training, and community service functions and attend company meetings. Please indicate your areas of special interest:

___ Firefighter ___ Emergency Medicine ___ Administrative ___ Fund Raising

NOTE:

NO APPLICATION WILL BE ACCEPTED WITHOUT THE FIRST YEARS DUES PAID IN FULL!

In order to be considered for membership you must submit a recent photo with your completed application.

If you are under age 18 you must submit a valid work permit with your application.

Failure to comply with all stated requests will cause your application to be held until such a time as all requirements are met satisfactorily

READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING

I hereby authorize the Hampstead Volunteer Fire Engine & Hose Company #1 to investigate any and all statements made in the above application for accuracy and integrity. To the best of my knowledge, all statements and information above is correct and true. Furthermore, I understand that the omission of facts may result in rejection of said application. Moreover, I hereby relinquish that I am eighteen (18) years of age and a citizen of the United States of America and eligible for employment.

The Hampstead Volunteer Engine & Hose Company #1 does not discriminate. Each applicant shall be judged on his or her individual qualifications and not by sex, race, creed, or national origin.

I, the undersigned,

- Do wish to become a member of the Hampstead Volunteer Fire Engine and Hose Company # 1.
- Do realize that I may be required to submit to a physical and obtain all necessary tests and training courses before actively functioning as an emergency provider.
- Do promise to abide by all rules set forth by the by-laws, board of managers, officers, and general membership of the Hampstead fire company.
- Do understand that I will be on probation for a period not to exceed one (1) year, unless deemed necessary by the officers of the Hampstead Fire Engine & Hose Company #1. I also understand that I will be required to attend five (5) meetings during my first year of membership in order to be eligible to vote on company matters.
- Have enclosed my \$5.00 application fee which will be used as a processing fee. If accepted, it will serve as my first year's dues. I have also enclosed a recent photograph of myself, which becomes property of the Hampstead Fire Engine & Hose Company #1.
- Do understand The Hampstead Volunteer Fire Company may or may not require as a condition of membership a criminal record check conducted by the Maryland State Fire Marshals Office. This is an allowance under Maryland law Article 38A, Section 7A (e) stating “Any volunteer or paid fire company or rescue squad may consider the existence of a criminal conviction in determining whether or not an applicant will be appointed or employed.”
- Do understand that I will be required to meet with the Fire Company’s membership committee after my application is presented to the Fire Company. At this meeting I may or may not be required to submit to a criminal background check.

APPLICANT SIGNATURE: _____ DATE: _____

FIRE COMPANY USE ONLY:

Date received: _____

Received by: _____

Date Received by Investigating Committee: _____

Obtained:

Driving Record: ____ Yes ____ No ____ N/A

Criminal Record: ____ Yes ____ No ____ N/A

Reference Interviews:

Recommendation of Investigation Committee:

If no, give reasons:

Investigators Signature

Approved _____ Disapproved _____

Date _____

Committee Members: _____

Date of Vote: _____

Voting Result: _____

Final Status: _____