



Holly Lake Volunteer Fire Department

Application for Membership

Name: _____
 last first middle

Date: _____
 DoB: _____
 SS#: _____
 Gender: M F

Address (mailing): _____
 Street City State Zip

Address (physical): _____
 Street City State Zip

Email: _____ Cell #: _____ Phone #: _____

Driver's License #: _____ State: _____ Class: _____ Restrictions: _____

U.S. Citizen? Yes No If no, status of residence in U.S. _____

Have you ever been convicted of a felony or currently under indictment? Yes No

Occupation: _____ Skills: _____

Previous firefighting experience / training: _____

Are you aware of any medical condition that would be detrimental to your health and well-being due to stress, physical exertion, or extreme heat? Yes No If Yes, briefly explain limitation: _____

Are you aware of any medical condition that would limit your participation in firefighting activities or training? Yes No If Yes, please explain: _____

Marital status: Married Single Divorced Widowed

Spouse's name (if applicable): _____

Children: (1) Name: _____ Age: _____
 (2) Name: _____ Age: _____
 (3) Name: _____ Age: _____
 (4) Name: _____ Age: _____

Please provide character references. The Membership Committee reserves the right to contact references to better understand the character and reputation of candidates.

(1) Reference name: _____ Phone: _____
 (2) Reference name: _____ Phone: _____
 (3) Reference name: _____ Phone: _____

Have you discussed your desire to join the HLVFD with your spouse? Yes No
 Does your spouse approve? Yes No



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I understand that it is required that I display good citizenship, keep my homeowner association account current, and obey the association rules (if residing in area with an association). If not residing at Holly Lake Ranch, I agree to obey the Holly Lake Ranch Association rules.

I agree to actively support the Holly Lake Volunteer Fire Department (HLVFD), to be physically ready to serve, and to follow the guidance of the HLVFD officers. In the event I am unable to do these things, I will offer my resignation.

I give my consent for the Membership Committee to perform a criminal background investigation driving record, employment history investigation, and check references. This information will be kept confidential to the extent possible.

By my signature below, I certify this information to be correct to the best of my knowledge.

(Signature)

(Date)

In accordance with the By-Laws of the Holly Lake Volunteer Fire Department, the Membership Committee will contact you to discuss your application and some of the expectations to be a member of the HLVFD. After this interview, the Committee will make a report and recommendation to the Chief for presentation to the general membership for voting approval.