



Wales Center Volunteer Fire Co., Inc.

12300 Big Tree Rd., PO Box 124, Wales Center, NY 14169-0124

Tel: 716-652-1051 Fax: 716-652-0244

Website: www.walescenterfire.com Email: apply@walescenterfire.com



APPLICATION TYPE:

- NEW
*REQUIRES 2 SPONSORS
- TRANSFER
*REQUIRES 1 SPONSOR
- REINSTATEMENT
*REQUIRES NO SPONSOR
- CHANGE OF STATUS
*REQUIRES NO SPONSOR

MEMBERSHIP CLASS:

- FIREFIGHTER
*MINIMUM AGE: 16
- EMS PROVIDER
*MINIMUM AGE: 18
- FIRE POLICE
*MINIMUM AGE: 21
- SOCIAL MEMBER
*MINIMUM AGE: 21

PERSONAL DATA

FULL NAME: _____ **MAIDEN SURNAME:** _____
* IF APPLICABLE

STREET ADDRESS: _____

PRIOR ADDRESS: _____
* IF LESS THAN 5 YEARS AT CURRENT ADDRESS

MAILING ADDRESS: _____
* IF DIFFERENT

SOC. SEC. NO.: _____ **DRIVER'S LIC. NO.:** _____

DATE OF BIRTH: _____ **PLACE OF BIRTH:** _____
* CITY AND STATE

GENDER: _____ **HEIGHT:** _____ **WEIGHT:** _____ **EYE COLOR:** _____ **HAIR COLOR:** _____

HOME PHONE NO.: (____) _____ **CELL PHONE NO.:** (____) _____
* INCLUDE AREA CODE

EMAIL ADDRESS: _____

BACKGROUND

HAVE YOU BEEN A LEGAL RESIDENT OF THE WALES CENTER FIRE PROTECTION DISTRICT, OR A MUTUAL AID DISTRICT, OR AN EMPLOYEE OF A BUSINESS LOCATED WITHIN THE DISTRICT FOR AT LEAST THE LAST SIX (6) MONTHS? [...] YES [...] NO
If 'NO', PROVIDE YOUR RESIDENCE(S) FOR THE LAST TWO (2) YEARS: _____

HAVE YOU EVER BEEN A MEMBER OF ANOTHER FIRE COMPANY/DEPARTMENT OR EMS SERVICE PROVIDER? [...] YES [...] NO
If 'YES', PROVIDE THE AGENCY NAME AND TELEPHONE NUMBER FOR YOUR MOST RECENT MEMBERSHIP, AND DATES OF SERVICE: _____

DO YOU HAVE ANY PREVIOUS FIREFIGHTING, EMERGENCY MEDICAL, FIRE POLICE OR OTHER PUBLIC SAFETY EXPERIENCE? [...] YES [...] NO
If 'YES', PROVIDE DETAILS, CERTIFICATIONS, AND EXPIRATION DATES, IF ANY: _____

DO YOU HAVE A RELATIVE THAT IS CURRENTLY OR HAS BEEN A MEMBER OF EITHER THE WALES CENTER VOLUNTEER FIRE COMPANY OR WOMEN'S AUXILIARY?
[...] YES [...] NO If 'YES', PROVIDE THE MEMBER'S NAME AND RELATIONSHIP TO YOU: _____

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EMPLOYMENT

EMPLOYER NAME: _____ WORK PHONE No.: (____) _____
* INCLUDE AREA CODE

STREET ADDRESS: _____

YOUR JOB TITLE: _____ YOUR SUPERVISOR: _____

RELEASE OF BACKGROUND INFORMATION

I, the undersigned, being an applicant for membership in the Wales Center Volunteer Fire Company, hereinafter referred to as the Company, have been advised that the Company will conduct a background examination as part of the approval requirements for membership. I hereby authorize the Wales Center Volunteer Fire Company, its officers and agents to conduct such an examination and I consent and authorize any and all governmental agencies, corporations, firms, associations, partnerships and individuals involved therewith to release any and all information requested by the Company, such as, but not limited to, criminal history and New York State driver's license checks.

Initial: _____

CERTIFICATION

READ THE FOLLOWING DECLARATION, THEN SIGN AND DATE THIS FORM:

"I DESIRE TO JOIN THE WALES CENTER VOLUNTEER FIRE CO., INC., AND I CERTIFY THAT I AM A RESIDENT OF THE WALES CENTER FIRE PROTECTION DISTRICT, OR A MUTUAL AID DISTRICT, OR AN EMPLOYEE OF A BUSINESS LOCATED WITHIN THE DISTRICT, AND THAT I HAVE NEVER BEEN CONVICTED OF THE CRIME OF ARSON IN ANY DEGREE. I HAVE BEEN PROPERLY ADVISED BY MY SPONSORS WITH THE REQUIREMENTS OF MEMBERSHIP."

SIGNATURE: _____ APPLICATION DATE: _____

IF YOU ARE REQUIRED TO HAVE SPONSORS (ACTIVE OR LIFE MEMBERS ONLY), THEY MUST SIGN BELOW:

SIGNATURE: _____ MEMBERSHIP ID #: 15091-_____
 SIGNATURE: _____ MEMBERSHIP ID #: 15091-_____

IF YOU ARE LESS THAN EIGHTEEN (18) YEARS OF AGE, YOUR PARENT OR GUARDIAN MUST SIGN THIS APPLICATION:

SIGNATURE: _____ RELATIONSHIP: _____

ALL APPLICATIONS (EXCEPT CHANGE OF STATUS) MUST BE ACCOMPANIED BY THE FIVE DOLLAR (\$5.00) APPLICATION PROCESSING FEE.

MAIL OR SUBMIT THE COMPLETED FORM TO: 12300 BIG TREE RD., PO BOX 124, WALES CENTER, NY 14169-0124

FIRE COMPANY USE ONLY		
<p>BOARD OF DIRECTORS' ACTION</p> <p>DATE OF VOTE: _____</p> <p style="text-align: center;">[] APPROVED [] DENIED</p>	<p>GENERAL MEMBERSHIP ACTION</p> <p>DATE OF VOTE: _____</p> <p style="text-align: center;">[] APPROVED [] DENIED</p> <p>MEMBERSHIP NUMBER ASSIGNED: _____</p>	<p>ARSON BACKGROUND INVESTIGATION</p> <p>DATE OF REPORT: _____</p> <p style="text-align: center;">[] PASSED [] FAILED</p>