

HAWTHORN VOLUNTEER FIRE DEPARTMENT
Hawthorn, PA 16230

MEMBERSHIP APPLICATION

_____ **Active** _____ **QRS** _____ **Junior** _____ **Social**

Name: _____ DOB: _____

Address: _____ PA, _____

Home Phone#: _____ Cell Phone #: _____

Employer: _____ Years of Employment: _____

Occupation: _____

In-case of an Emergency please contact: _____

Phone #: _____ Relation: _____

Have you ever:

- Been discharged/forced to resign from any organization due to misconduct?
Yes / No If yes, explain: _____
- Been convicted of a felony or misdemeanor?
Yes / No If yes, explain: _____
- Been a member of any other Emergency service before?
Yes / No If yes, which company: _____
- Had any prior fire training/ EMS training?
Yes / No If yes, what: _____
- Can you answer the alarm at any time?
Yes / No If no, explain: _____

Will you read the By-Laws of the HVFD and comply with the requirements and be governed by them? Yes / No

Please list three (3) references that we may contact regarding your application;

1. Name: _____ Phone#: _____
2. Name: _____ Phone#: _____
3. Name: _____ Phone#: _____

I hereby certify that the above information is true to the best of my knowledge. I further agree that if accepted into membership to follow all laws and regulation set forth by the HVFD.

Signature: _____ Date: _____

There is a \$7.00 fee; \$2.00 for the application and \$5.00 for the current year of membership dues. Please note that the HVFD has the right to apply for a background check if the company requests one.