

Application for Jr. Firefighter

Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ Age: _____

Home Phone: _____ - _____ - _____ Student at: _____

Cell Phone: _____ - _____ - _____

Father or Legal Guardian

Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ - _____ - _____ Work Phone: _____ - _____ - _____

Cell Phone: _____ - _____ - _____ Emergency Number: _____

Mother or Legal Guardian

Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ - _____ - _____ Work Phone: _____ - _____ - _____

Cell Phone: _____ - _____ - _____ Emergency Number: _____

Work paper to be completed prior to participating in any function or activity.

We understand that the state guidelines require that all junior firefighters ages 14 and 15 are not permitted to participate in any fire company operations after 7:00pm unless there is written parental consent.

This will serve as our consent to allow: _____ to participate in fire company operations until 10:00pm.

Legal Guardian: _____ Date: ____/____/_____

Legal Guardian: _____ Date: ____/____/_____