

APPLICATION FOR MEMBERSHIP



Fill out all applicable portions of this form as completely as possible. At any time, you may save this form on your system using the "Save As" icon; retrieve it later to add more information, and, when you are ready to submit it, print it using the "Print" icon.

You must submit the following certifications with this application:

- **Pennsylvania Child Abuse History Clearance** available from https://www.compass.state.pa.us/cwis/public/home.
- Pennsylvanian Access to Criminal History (PATCH) Criminal Background Check available from https://epatch.pa.gov/home.
- If you have lived outside of the Commonwealth of Pennsylvania at any time in the last ten
 (10) years, you must submit: FBI Criminal History Clearance available from
 https://www.dhs.pa.gov/KeepKidsSafe/Clearances/Pages/FBI-Fingerprinting.aspx
- If you are under 18 years of age, you must submit your "working papers" available from your local School District and fill out "Junior Member" and "Parental Authorization" sections of this application.

If you already have any of these certifications, you may submit them. However, all have expiration dates and no certificate over five years old will be accepted. Most of these agencies waive or reduce fees for volunteers but any charges are the responsibility of the applicant.

Please make sure that you have signed all required sections of the form.

What to Expect as an Applicant

This completed form and all the other required documents must be submitted for review by the Membership Committee. Deliver them to the firehouse (647 Germantown Pike) or mail them to P.O. Box 60, Lafayette Hill, Pennsylvania, 19444. We **DO NOT** recommend emailing documents containing personally identifiable information.

After the Committee has reviewed your application, they will contact you with any questions or concerns and, when it is complete, request that you attend a General Membership Meeting.

General Membership meetings are held at the firehouse on the first Wednesday of each month. You will be asked to arrive at 7:00PM to be interviewed by the Membership Committee and then attend the general meeting at 7:30PM to be approved as a Probationary Member by the membership.

As a Probationary Member, you will be expected to attend general training on Monday nights and participate other Company functions to the level of your training and ability. After six months of probation, you will be confirmed as a Full Member at a General Membership Meeting.

If you have questions, please email BHFC@BarrenHill.com.



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Name: First:	Nicl	kname:
Middle:		
		Suffix:
Address: Street:		
		_ State: Zip:
Date of Birth:	Are you a U.S. Citiz	en (Yes/No)?
Telephone: Mobile:	Accepts T	ext Messages (Yes/No)?
Home:		
Work:	Extn.:	_
Other:	Type:	
Email: #1:		
#2:		
Driver's License: State:	Number:	Class:
Do you have a Comm	ercial Driver's License (CI	DL) (Yes/No)?



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MEDICAL INFORMATION

Do you have any medical conditions which would prevent you from performing any type of fire / rescue activities (Yes/No)? If Yes, Explain:		
Do you have any physical lin type of fire / rescue activitie		revent you from performing any , Explain:
Blood Type:		
Allergies:		
Preferred Hospitals in Case	of Emergency:	
1 st Choice:	2 nd Choice	::
Emergency Contacts:		
Name:		Relationship:
Telephone:	Address:	
Name:		Relationship:
Telephone:	Address:	
Name:		Relationship:
Telephone:	Address:	



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EMERGENCY SERVICE AFFILIATIONS

List any other Emergency Service Organizations that you are currently or have been a member of in the past:

Organization:		
Member from:	thru:	-
Chief Officer:		
Telephone or Email:		
Organization:		
Member from:	thru:	-
Chief Officer:		
Telephone or Email:		
Organization:		
Member from:	thru:	-
Chief Officer:		
Telephone or Email:		
Have you ever been discharged from services organizations (Yes/No)?		r emergency



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EMPLOYMENT INFORMATION

Latest Employer:	
Supervisor:	
Description of Job Duties:	
Date Hired:	Date Left:
Reason for leaving:	
Previous Employer:	
Telephone or Email:	······
Supervisor:	
Description of Job Duties:	
Date Hired:	Date Left:
Reason for leaving:	
Previous Employer:	
Address:	
Telephone or Email:	
Supervisor:	
Description of Job Duties:	
Date Hired:	Date Left:
Reason for leaving:	



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PERSONAL REFERENCES

How do you know this person? _____



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Grade:

JUNIOR MEMBER INFORMATION

{This section applies ONLY if the applicant is less than 18 years of age}

The Pennsylvania Child Labor Law regulates what that minor can do as part of any employment – including volunteer fire companies. You must submit a copy of your working papers with this application. If you do not have them, you may apply through the Guidance Office of your school.

If accepted into the Barren Hill Volunteer Fire Company as a Junior Member, you MUST maintain a "C" average to continue as a member. You are required to submit a copy of your most recent report card with this application and, each marking period, submit your current report card to the Office of the Fire Chief.

School: ______

PARENTAL AUTHORIZATION {This section applies ONLY if the applicant is less than 18 years of age}			
Parent / Guardian's Name:			
Address:			
City:	State:	Zip Code:	
Telephone:			
Email:			
Barren Hill Volunteer Fire C	ompany. I have reviewed the requirements of mo	o participate as a volunteer with to the Junior Membership Rules a embership and the parameters or	nc
Parent's Signature		Date	



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CRIMINAL HISTORY

equivalent (Yes/No)? If Yes, Explain:	demeanor or Summary violation or the
Have you ever been incarcerated for any Felony, for the equivalent (Yes/No)? If Yes, Explain	-
Have you lived outside of the Commonwealth of (10) years (Yes/No)? If Yes, you must subnwith this application.	•
AUTHORITY TO RELEASI	E INFORMATION
I hereby authorize any criminal justice officer or of Barren Hill Volunteer Fire Company bearing this ravailable from my past and present employers, comedical records. I request that the custodian of records to be examined, copied, or otherwise rev	release, to obtain all information redit references, criminal records and records, in each case, permit my
I hereby release any such authority, including its individually and collectively from all liability, from at any time, result to me, my heirs, my family or a with this authorization and request to release inf	n damages of whatever kind which may any associates because of compliance
All information obtained will be held in strictest of	confidence.
Applicant Signature	 Date



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COMMITMENT AGREEMENT TO VOLUNTEERING

By agreeing to membership with the Barren Hill Volunteer Fire Company, I agree to commit to a minimum of three years of active membership to the Company. For the purpose of this Membership Application ONLY, the standard of active membership shall be as follows:

- 10% of dispatched emergency calls; OR
- 10% of scheduled training sessions; OR
- 10% of scheduled special services; OR
- 4 Company Meetings

Applicant Signature

Company may seek restitution from the member for costs of ed	suinment goar training
. , ,	duibinient, gear, training
and any other associated costs with being a member.	

In the event of non-compliance with this agreement, the Barren Hill Volunteer Fire

Date