



# Howlett Hill Fire Department

A VOLUNTEER SERVICE ORGANIZED 1948

BEEF STREET

SYRACUSE, NEW YORK 13215

Application for Membership - District / Non-District

NAME \_\_\_\_\_ SPOUSE \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Apt. # \_\_\_\_\_ Zip Code \_\_\_\_\_ Home phone # (\_\_\_\_) \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of birth \_\_\_\_\_

Drivers license - STATE \_\_\_\_\_ # \_\_\_\_\_

Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Address \_\_\_\_\_ Work phone # (\_\_\_\_) \_\_\_\_\_

NORMAL WORK HOURS \_\_\_\_\_ Blood type \_\_\_\_\_

Previous fire department membership \_\_\_\_\_

Previous fire, rescue, medical experience \_\_\_\_\_

Do you have any physical defects that would prevent you from performing volunteer firefighter duties YES NO

If YES, please explain in detail \_\_\_\_\_

Recommended by \_\_\_\_\_

I certify that all of the statements above are true and correct to the best of my knowledge.

I recognize that any misstatement I have made may subject me to immediate discharge. I hereby give the Howlett Hill Fire Department the right to verify any statements made in the above application.

By applying for ACTIVE MEMBERSHIP to the Howlett Hill Fire Department, I understand that a minimum number of training hours and business meetings must be attended. Also I understand that I am expected to be at ALL alarms for which I am available.

Signature \_\_\_\_\_ Date \_\_\_\_\_