

# CAMP HILL FIRE COMPANY NO. 1

2198 Walnut Street, Camp Hill, Pa 17011  
 Station 717.737.4623



## Application for Membership

Date of Application: _____				BASIC INFORMATION			
Last Name:		First Name:		Middle Name:			
Current Address:		City:		State:		Zip Code:	
Years at Current Address:		Home Phone:		Cell Phone:		Cell Phone Provider/Carrier:	
Age:		Date of Birth:		Social Security Number:		Marital Status:	
E-Mail Address:		Driver License Number:		Driver License State - Class - Expiration - Restrictions			

### Previous Addresses:

Street Address:	City:	State:	Zip:
Street Address:	City:	State:	Zip:
Street Address:	City:	State:	Zip:

### EMERGENCY INFORMATION

1 <sup>ST</sup> Emergency Contact:	Phone:	Relationship:	
Address:	City:	State:	Zip:
2 <sup>ND</sup> Emergency Contact:	Phone:	Relationship:	
Address:	City:	State:	Zip:

### AVAILABLE POSITIONS

Please select ONE of the following positions for which you would like to apply

         **Active Member & (          Fire Fighter or          Fire Police ) (          Live-In \*Fire Fighter Only\*)**

- This category of membership allows prospective applicants that are 18 years or older to fully participate in the company by attending meetings, voting on company matters, participating in company functions and holding an office/position.

         **Junior Member**                      Grade:               School:               Counselor:         

- This category of membership allows prospective applicants between the ages of 14 thru 17 to learn about firefighting and/or the fire company in a controlled environment.
- Interested minors may actively participate in company functions and voice their opinion on company matters but cannot hold office or vote on company matters.
- Interested minors may be eligible to participate in various fires & rescue duties and training at the discretion of the fire chief.
- Parental permission is required to pursue this category of membership and certain restrictions may apply.
- Perspective minors in this category must adhere to all requirements of the "Pennsylvania Child Labor Laws". (Act of 1915, P.L. 286, No. 177) and must maintain an overall "C" average in school.

         **Social Member**

- This category of membership allows prospective applicants 14 years and older to actively participate in company functions and voice their opinion on company matters but cannot hold office or vote on company matters.
- Prospective applicants in this position may not participate in emergency operations.
- Prospective applicants between the ages of 14 thru 17 require parental permission to pursue this category of membership and certain restrictions may apply.

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## EMPLOYMENT INFORMATION

*If unemployed, list last employer and end date*

Employer Name:		Phone:		
Address:		City:	State:	Zip:
Position Title:	Years Employed:	Start Date:		End Date:
Supervisor Name:		Phone:	Email:	

## MILITARY SERVICE INFORMATION

Have you ever been in the Armed Services: (YES/NO)	If yes, what branch:	Date of Service From:	To:
Type of Discharge:			

**PLEASE ATTACH A COPY OF YOUR DD214 TO THIS APPLICATION.**

## PREVIOUS TRAINING

*Please submit copies of any certifications you may hold or any classes you may have attended*

<input type="checkbox"/> None <input type="checkbox"/> CPR <input type="checkbox"/> First Aid <input type="checkbox"/> First Responder <input type="checkbox"/> EMT  <input type="checkbox"/> Other: _____	<input type="checkbox"/> Essentials of Firefighting <input type="checkbox"/> Firefighter 1 <input type="checkbox"/> Firefighter 2 <input type="checkbox"/> Pump Ops 1 <input type="checkbox"/> Pump Ops 2 <input type="checkbox"/> Engine Company Ops <input type="checkbox"/> Truck Company Ops <input type="checkbox"/> Emergency Vehicle Training	<input type="checkbox"/> HazMat Awareness <input type="checkbox"/> HazMat Ops <input type="checkbox"/> Basic Vehicle Rescue – Awareness <input type="checkbox"/> Basic Vehicle Rescue – Operations <input type="checkbox"/> Basic Vehicle Rescue – Technician
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## PERSONAL REFERENCES

Name	Address	Phone	Relationship	Years Known
1.				
2.				
3.				

**Briefly explain why you would like to join our fire company?**

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HEALTH INFORMATION					
Physician Name:	Phone:	Blood Type:	RH:	Blood Pressure:	Pulse:
Allergies:		Medications:			
Organ Donor: (Yes/No)	Religion:			Hospital Preference:	
Do you have any physical or mental conditions that may prevent you from completing the duties of the position applied for? (YES/NO) If Yes, please explain:					
Have you ever been treated for any illness or injuries within the past five (5) years that have required the attention of a physician or hospital? (YES/NO) Please explain:					
BACKGROUND INFORMATION					
<i>Circle your answers below and provide additional details if required</i>					
<b>1. Have you ever applied for membership with us before?</b>				<b>Yes</b>	<b>No</b>
a. If yes, when:					
<b>2. Have you ever applied for membership with any other fire or ambulance company before?</b>				<b>Yes</b>	<b>No</b>
a. If yes, please list, starting with the most recent:					
Company Name: _____	Location: _____	Year Applied: _____	# Years Present: _____		
Company Name: _____	Location: _____	Year Applied: _____	# Years Present: _____		
Company Name: _____	Location: _____	Year Applied: _____	# Years Present: _____		
Company Name: _____	Location: _____	Year Applied: _____	# Years Present: _____		
Company Name: _____	Location: _____	Year Applied: _____	# Years Present: _____		
<b>3. Have you ever been denied membership from any volunteer organization before?</b>				<b>Yes</b>	<b>No</b>
a. If yes, when:					
b. If yes, name of organization:					
<b>4. Have you ever been suspended, dismissed or terminated from any volunteer organization?</b>				<b>Yes</b>	<b>No</b>
a. If yes, when:					
b. If yes, name of organization:					
c. If yes, reason:					
<b>5. Have you ever been convicted of, or pled guilty or nolo contendere (no contest) to a crime or DUI related offense; other than a minor traffic citation in court?</b>				<b>Yes</b>	<b>No</b>
a. If yes, when:					
b. If yes, what:					
<b>6. Has your driver's license ever been suspended or revoked?</b>				<b>Yes</b>	<b>No</b>
a. If yes, what:					
<b>7. Have you held a driver license from any other state, excluding Pennsylvania, within the last four (4) years?</b>				<b>Yes</b>	<b>No</b>
a. If Yes, where:					
<b>8. Are you an unlawful user or addicted to any intoxicating liquors, depressants, stimulants or narcotic drugs?</b>				<b>Yes</b>	<b>No</b>
<b>9. Are you affiliated with any group(s) whose policies or activities are subversive to the form of government in the constitution and laws of the United States or Commonwealth of Pennsylvania?</b>				<b>Yes</b>	<b>No</b>

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**IF CONVICTED OF ARSON YOU ARE BREAKING THE LAW BY FILLING OUT THIS APPLICATION**

## AUTHORIZATION

By signing this application, I promise, if accepted, to adhere to the By-Laws, Constitution, Policies, and Standard Operating Guidelines (SOGs) of the Camp Hill Fire Company. I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I have never been convicted of an offense that constitutes the crime of "arson and related offenses" under 18 Pa. C.S. § 3301 or any similar offense under any Federal or State law. I understand that if I knowingly make any false statement herein, I am subject to penalties prescribed by law, including, but not limited to, a fine. Furthermore, I understand it would be sufficient cause for removal as a member or denial of membership. I also understand that I will be subject to a Pennsylvania State Police Criminal Background Check and Child Abuse Screening that will be completed by the Camp Hill Fire Company. Upon acceptance, the applicant will have up to a 6 month probation period and may be asked to leave the Fire Company at any time for any reason.

Applicant Signature:	Date:
Signature of Parent/Guardian:	Date:

**\*If applicant is under the age of 18, working papers and parent/guardian consent must accompany this application\***

Mail Application to:  
 Or Drop off at the Station

Camp Hill Fire Company No. 1  
 ATTN: Recruitment Committee  
 2198 Walnut Street  
 Camp Hill PA 17011

## OFFICIAL USE ONLY

Date Application Submitted: _____ / _____ / _____	Working Papers Received (if under 18): _____
Date PSP Background Check Received: _____ / _____ / _____	Background Check Results: _____
Date Child Abuse Screening Received: _____ / _____ / _____	Child Abuse Screening Results: _____
Date of Driving Record Received: _____ / _____ / _____	Driving Record Results: _____
Date of Committee Interview: _____ / _____ / _____	Recommended Action: _____
Date of Board Review: _____ / _____ / _____	Recommended Action: _____
Date of Membership Action: _____ / _____ / _____	Final Action Taken: _____
Date of Probation Expiration: _____ / _____ / _____	Probation Action: _____

*Camp Hill Fire Company No. 1 is an Equal Opportunity Employer and does not discriminate on the basis, of sex, color, religion, creed, age or handicap.*