



ST. REMY VOLUNTEER FIRE DEPARTMENT

INCORPORATED AS
CHEMICAL ENGINE CO. NO. 1 INC.
ST. REMY, NEW YORK

STATION 1
MAIN ST.
ST. REMY, NEW YORK

MAILING ADDRESS
P.O. BOX 124
ULSTER PARK, NEW YORK 12487

STATION 2
UNION CENTER RD.
UNION CENTER, NEW YORK

Name _____ Age _____ Date of Birth _____

Street/Mailing Address _____

Drivers License # _____ Home Phone _____

Work Phone _____ Cell Phone _____

E - Mail _____ Employer _____

If you have any prior experience in the Fire Service, complete the following:

Fire Company _____ State _____ Dates Served _____

Positions Held _____

Have you ever been denied or expelled from membership in a Fire Company? _____

If yes, explain circumstances _____

Do you have any history of a physical disability? _____

If yes, explain circumstances _____

Are you allergic to any medication? _____

Company Physical approved on the following date _____

In case of an emergency or accident notify:

Name _____ Phone _____

Address _____

Have you ever been arrested? _____

If yes, were you convicted? _____

Have you ever been arrested for arson? _____

If yes, were you convicted? _____

I _____, hereby consent to the St. Remy Fire Department conducting and receiving the results of an arson, criminal and vehicle background check, including releasing information as to all convictions or plea to any misdemeanor, felony or driving related offense. I certify the above information is true, and that I will abide by the Constitution and By-Laws as enacted by this organization.

Signature _____ Recommended by _____

Investigating Committee Approvals: _____ Date _____

Fire Schools & Training Attended (Military and/or Civilian), Certificates & Expiration Dates:

Course/Certificate _____ Date _____ Remarks _____

Board of fire Commissioners _____ Date _____
St. Remy Fire District

Gentlemen:

By a vote of ___ yea and ___ nay on _____, this membership was approved by the fire company. Your approval is requested.

Secretary, St. Remy Fire Company _____

St. Remy Fire Company _____ Date _____
Attention: Secretary

At a meeting held on _____, this membership was (dis)approved by the Board of Fire Commissioners.

Secretary, St. Remy Fire Commissioners _____

Dues Paid _____ Card Lock Given on _____ Badge No. 52

New member letter sent _____