

APPLICATION FOR MEMBERSHIP

Board of Directors

1. NAME: _____
2. HOME STREET ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
3. BIRTHDATE: _____ CITIZEN OF UNITED STATES: YES NO
4. HOME PHONE NUMBER: _____ WORK PHONE NUMBER _____
5. E-MAIL ADDRESS: _____ MOBILE PHONE NUMBER _____
6. Able to attend a minimum of four (4) Company Meetings & six (6) other events annually: YES NO
(Company meets on the first Monday of each month) Other events are: Committee meetings, fundraisers, etc.
7. Willing to serve regularly on one or more standing committees of the Company or on Ad-Hoc committees when appointed. YES NO
8. OCCUPATION/PROFESSION: _____
9. EMPLOYER: _____ POSITION: _____
10. COMMUNITY ACTIVITIES EXPERIENCE: _____

11. REFERENCES:

NAME: _____ NAME: _____ NAME: _____
ADDRESS: _____ ADDRESS: _____ ADDRESS: _____
CITY: _____ CITY: _____ CITY: _____
PHONE: _____ PHONE: _____ PHONE: _____

12. NAME OF INDIVIDUAL WHO SUGGESTED MEMBERSHIP: _____

13. I want to be a Director of the Fire Company because: _____

14. I can contribute the following to the Fire Company: _____

15. List special skills or disciplines you have (i.e.: Accounting, Technology, Legal, etc.): _____

DATE PREPARED: _____

SIGNATURE OF APPLICANT