

# Hammonton Volunteer Fire Department



## *Membership Application*

*Please fill out this application to the best of your knowledge. Once you are finished you can take the application to the Clerk's office in town hall or stop by which Fire Company #1 (Front st) or #2 (White Horse Pike). Members are at each location between 7 and 8 pm every Wednesday evening.*

**Hammonton Volunteer Fire Department**  
*Membership Application Form*

**PERSONAL**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ @ \_\_\_\_\_

Age/Date of Birth: \_\_\_\_\_

Marital Status: \_\_\_\_\_

Spouse Name/Age/Date of Birth: \_\_\_\_\_

Children Name/Age/Date of Birth:

\_\_\_\_\_

Social Security Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Birthplace: \_\_\_\_\_

If not USA where we're you born and when were you naturalized:

\_\_\_\_\_

Number of years as a Hammonton resident: \_\_\_\_\_

Drivers License: Y or N Has your license ever been suspended or revoked, if so explain why:

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Religion (Optional): \_\_\_\_\_

### **Employment**

Name of Employer: \_\_\_\_\_

Address of Employer:

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Work Schedule: \_\_\_\_\_

Does your occupation require extended travel: Y or N

### **Arrest Record**

Have you ever been arrested Y or N

If so how many times: \_\_\_\_\_

Explain the charge and circumstances of each arrest:

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**Physical Condition**

Height: \_\_\_\_\_

Weight: \_\_\_\_\_

Blood Type: \_\_\_\_\_

Do you have any physical impairments: Y or N

If so please explain each:

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Are you presently under a doctors care: Y or N

If so please explain:

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Who is your family physician: \_\_\_\_\_

Please briefly list your medical history for the past 10 years:

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Do you take any medication: Y or N

If so please list each and what they are for:

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## **Organization Membership**

Please list all civic, fraternal and/or religious groups you are a member of:

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How many monthly meetings do you attend: \_\_\_\_\_

How much of your time can you devote to the fire company:

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Do you understand that there are mandatory attendance requirements for drills, fires and meetings:            Y or N

Do you understand that fines could be imposed for non attendance at drills, fires, and meetings:            Y or N

Have you ever belonged to another fire company:            Y or N

If so, how long we're you a member and why did you leave:

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**Qualifications:**

Can you drive a vehicle larger than a passenger vehicle: Y or N

If so please list the vehicles and the nature of your experience:

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Do you have CPR or any other first aid training: Y or N

Can you climb a ladder: Y or N

How much weight can you lift: \_\_\_\_\_

How much weight can you carry: \_\_\_\_\_

Can you swim: Y or N

Briefly explain why you want to join the Fire Department:

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Who recommended you for membership: \_\_\_\_\_

Which Company would you prefer to join: 1 or 2

If you wish to make any comments or provide any additional information please let us know in the space below:

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I fully understand that the Hammonton Fire Department is a volunteer organization. I must and will comply with the Town ordinances that regulate the Fire Department and agree to comply with Department rules and regulations and will at all times obey the orders given to me by my superiors.

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Date

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Signature of Applicant

I hereby recommend this applicant for active membership in the Hammonton Volunteer Fire Department.

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Date

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Chief, Hammonton Fire Dept.

My signature hereto gives the Hammonton Volunteer Fire Department or their designated representative the authority to obtain information concerning my driving record, criminal record, medical records for treatment or undergoing currently. It will also be mandatory for me to undergo drug and alcohol testing along with a physical before my application can be processed.

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Applicant