

MEMBERSHIP APPLICATION FOR THE

WEST READING FIRE COMPANY #1

- Complete and return all pages of the application
- Electronically complete the PA Child Abuse Clearance check at <u>http://www.compass.state.pa.us/CWIS</u>. This is <u>REQUIRED</u> for your application for senior membership to be considered by the company.
- If you have any questions please contact Fire Chief Chad Moyer at 610-372-9621 or by email at cmoyer@westreadingborough.org



WEST READING FIRE DEPARTMENT

Application for Senior Membership

(Please attach \$10.00 non-refundable fee for processing and first year's dues if accepted)

Referred by whom (current fire department member):					
Date of application:					
Last Name:	First Name:	Middle Initial:			
Present address: Street	City	State, Zip			
Phone Number:	Date of Birt	h:			
Social Security #:	email:				
Are you a U.S. Citizen? Yes or	No Ever Convicto	ed of a Crime? Yes or No			
If "yes" please give details:					

(Do not include minor traffic violations. Conviction of a crime does not automatically disqualify you from membership)

FIREFIGHTING ASSOCIATIONS:

Please list current or past memberships in other fire companies or ambulance associations:

Have you ever had a membership in another fire company suspended or revoked?

If so, which company/companies?

Why do you want to become a member of the West Reading Fire Company?

If your membership is approved, you plan on becoming:

ACTIVE (Firefighting, training, fund raising)	
FIRE POLICE	
SEMI ACTIVE (Mainly fund raising)	
INACTIVE (Card-carrying member only)	

EDUCATION:

High School:	Graduated?	Yes or No
College or Trade School:	Graduated?	Yes or No

Please circle any fire related training you have:

Firefighting Training:

Essentials Module 1	SCBA	Pump Operations		
Firefighter 1	Firefighter 2	CPR		
Haz Mat Awareness	EMT	EMT-P		
Fire Officer 1	Fire Officer 2	Basic Vehicle Rescue		
Fire Police Training:				
Basic Fire Police	Advanced Fire Police	Other		
Please list any others:				

REFERENCES:

List below three people (not related to you) whom we may contact for references:

Name	Address	Phone
Name	Address	Phone
Name	Address	Phone
EMPLOYMENT	INFORMATION:	
Present Employer:	:	
Employer's addres	ss:	
Phone number:		Position held:

BACKGROUND CHECK AUTHORIZATION- PLEASE READ CAREFULLY AND SIGN BELOW:

I, the undersigned, have made application to the West Reading Fire Company #1 for membership. By signing below I give formal consent and authorization to the West Reading Fire Company #1 to investigate all statements I have made within this application, including but not limited to my criminal history, prior firefighting affiliations, personal references, and any other information which the West Reading Fire Company #1 may deem necessary or relevant to my application. By signing below, I affirm that all statements made within this application are true and correct to the best of my knowledge.

Signature of applicant: _____

Print name of applicant: _____

DO NOT WRITE BELOW THIS LINE

Remarks of the investigating committee: _____

We, the investigating committee, have investigated the above applicant and <u>DO</u> recommend him/her for membership:

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