

**Upper McKenzie Rural Fire Protection District**  
**Application for Volunteer Fire Fighter Membership**

Date \_\_\_\_\_

Name \_\_\_\_\_ Email Address \_\_\_\_\_

Primary Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Driver License # \_\_\_\_\_ State \_\_\_\_\_ Exp. \_\_\_\_\_ Class \_\_\_\_\_

Fire Service Experience \_\_\_\_\_

CPR Certified? \_\_\_\_\_ expiration \_\_\_\_\_

Please describe why you want to be a Volunteer:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List three references not related to or living with you. Please give complete information

Name	Street Address	City	Zip	Phone
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

I authorize the Upper McKenzie Rural Fire Protection District to investigate all references and to secure additional information about me, if job related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporation or organizations for furnishing such information.

Signature \_\_\_\_\_ Print Name \_\_\_\_\_

Reference letters sent \_\_\_\_\_ Received \_\_\_\_\_

Reviewed by Chief Officers \_\_\_\_\_ Date \_\_\_\_\_ Notification Letter \_\_\_\_\_



I have filled out the background authorization form



I have filled out the emergency contact notification