

CHURCH HILL



VOLUNTEERS

Dear Volunteer Applicant:

On behalf of the Church Hill Volunteer Fire Company, we would like to thank you for applying to serve as a member of this fine organization. Serving as a Volunteer Firefighter, EMT, or Paramedic, Administrative or Associate Member can be a very rewarding experience, yet it is also very challenging and demanding. Our responsibilities in providing high quality Fire and EMS protection to the community have grown, as have the technical and administrative aspects of our duties. We truly hope that you can help us in our team effort to serve and protect our community. After successful completion of the background and interview process the following requirements must be satisfactorily met to serve as an Active Volunteer:

FIRE/EMS MEMBERS

Complete a Six (6) Month Probationary Period

Payment of Dues - \$1

Attend Forty (40) Functions

Which include but are not limited to: Fire/EMS Responses, Meetings, Drills, Training Courses, Fund-Raisers, Parades, Fire Prevention Activities, etc.

Attend Eight (8) Fire Company Business Meetings

Attend Four (4) Fire Company Level Training Sessions

Obtain Twelve (12) Hours of Training (Company Level, Formal or Combined)

Attend Fifteen (15) Hours of Fund-Raising Activities

ADMINISTRATIVE MEMBERS

Payment of Dues - \$1

Attend Five (5) Company Related Functions

Which include but are not limited to Meetings, Fund-Raisers, Fire Prevention Activities, etc.

Attend Ten (10) Fire Company Business Meetings

ASSOCIATE MEMBERS

Complete a Six (6) Month Probationary Period

Attend Twenty (20) Functions

Which correspond with that of a Fire/EMS Member

Will not be allowed to vote during the annual election of officers or hold office

Will not be issued a key to the station

The Church Hill Volunteer Fire Company is proud and distinguished that you are considering becoming a member. We hope that you will be taken care of during your journey as a member.

Yours in the Fire Service,

Members of the CHVFD Membership Committee



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Application Packet Checklist

Please be sure to complete and include the following items prior to turning in your application. Failure to do so may delay processing your application.

1. Complete Fire Company Application.
2. Obtain letter and/or physical form from primary physician indicating you can perform the duties for which you are applying. (*Administrative members exempt*)
3. Obtain copies of any training records & certificates.
4. If you are currently a member of another Fire/EMS organization, obtain a letter of recommendation from the current Chief/President.

Application Process

1. Return completed application packet either by mail or dropping off in person.
2. Membership Committee will receive application and contact you to schedule an interview.
3. Complete a background investigation (Fingerprinting) performed at the QAC Office of the Sheriff. You will receive the forms and instructions at your interview.
4. Current membership will vote at next general business meeting to accept or deny your application.
5. If accepted, your 6 month probationary period begins. You may begin attending functions and training.



APPLICATION FOR MEMBERSHIP

SECTION I:

MEMBERSHIP CLASSIFICATION REQUESTED: (CHECK ONE)

Regular EMS Only Administrative Associate

(Please Print)

Name (First, Middle, Last): _____

Address, City, State, & Zip: _____ Date of Birth: _____

_____ Sex: M F

Race: _____ Marital Status: Single Married Divorced

Home Phone: _____ Cell Phone: _____

E-mail: _____ Social Security #: _____-_____-_____

Employer's Name: _____

Employer's Address: _____

Occupation: _____ Work Phone: _____

SECTION II:

List any medical conditions that may affect your performance or limit your duties in this Fire Company:

Physician's Name: _____ Phone #: _____

Physician's Address: _____

EMERGENCY NOTIFICATION: _____

Address: _____

Phone #: _____

Relationship: _____

SECTION III:

Do you have a valid Motor Vehicle Operators License? YES NO

State: _____ Class: _____ Current Points (if applicable): _____

Driver's License #: _____

SECTION IV:

- Are you now or have you ever been a member of any Fire Company and/or Rescue Squad?
 YES NO

- List Company Name & Address as well as the dates you were a member:

- Why did you leave that organization? _____

- List any training and/or experience that you may have received in firefighting, EMS or rescue operations

- List any certifications that you may have: _____

- Do you belong to any other organizations? YES NO
- List those organizations: _____

- Have you ever been convicted of any crime other than a traffic violation? YES NO
- List below any convictions and dates: _____

PERSONAL REFERENCES: List three (3) people NOT related to you

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Name: _____ Phone #: _____

- Do you have any objection to the Membership Committee verifying any and all statements concerning this application?

YES NO If Yes, please explain: _____

In a brief statement, please explain why you want to become a member of the
Church Hill Volunteer Fire Company.

SECTION V:

I, the undersigned hereby declare all statements and information in this application are true and complete, and understand that any untrue, misleading answer or deliberate omission or concealment may be grounds for refusal of membership in the Church Hill Volunteer Fire Company, Inc.

I, the undersigned authorize the Church Hill Volunteer Fire Company, Inc. to conduct a background investigation and to communicate with any individual or organization listed in this application for the purpose of investigating or confirming my character, conduct or record and to keep and preserve records of such communications. Additionally, I release all parties from all liability for damage that may result from furnishing any information.

If accepted for membership, I agree to read and abide by the Constitution & By-Laws of the Church Hill Volunteer Fire Company, Inc. and any and all Standard Operating Guidelines, House Rules, Directives and any other rules and regulations adopted by the Fire Company. I further agree that upon termination of my membership with the Church Hill Volunteer Fire Company, Inc. I will return all Fire company property entrusted to me.

Applicant's Signature

Date

If the applicant is under the age of 18, a signature of a parent or legal guardian is required.

Parent/Legal Guardian's Signature

Date

Please return the completed application packet to:
Church Hill Volunteer Fire Company
C/O Membership Committee
316 Main Street
P. O. Box 66
Church Hill, MD 21623

You may also contact us at 410-758-6552.
Leave a message and someone from the committee will return your call.

MEMBER TRACKING SHEET

Date Application Given Out: _____ Date Received: _____

Date of Interview: _____ Interviewed By: _____

Results of Physical Examination: ACCEPTABLE NOT ACCEPTABLE

Comments: _____

Results of Background Check: ACCEPTABLE NOT ACCEPTABLE

Comments: _____

Recommendation of the Membership Committee: APPROVE NOT TO APPROVE

Proposed before the Company (Date): _____ ACCEPTED NOT ACCEPTED

Issued Current Copy of By-Laws DATE: _____

Additional Membership Committee Comments: _____

THIS FORM IS TO BE KEPT WITH THE ORIGINAL APPLICATION AT ALL TIMES