



FOR APPLICANTS UNDER 18 YEARS OF AGE PLEASE COMPLETE THE FOLOWING:

PARENT(S) OR GUARDIAN(S);

1. \_\_\_\_\_  
NAME ADDRESS PHONE

2. \_\_\_\_\_  
NAME ADDRESS PHONE

I/WE UNDERSTAND AND HAVE REVIEWED ALL OF THE ABOVE QUESTIONS. I/WE FURTHER AGREE THAT THE ABOVE WRITTEN INFORMATION IS COMPLETED CORRECTLY. I/WE GIVE PERMISSION TO THE ABOVE NAMED APPLICANT THAT HE/SHE MAY JOIN THE CROYDON VOLUNTEER FIRE COMPANY.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

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ALL INDIVIDUALS WHO ARE APPLYING FOR MEMBERSHIP OF THE CROYDON VOLUNTEER FIRE COMPANY MUST HAVE THE ATTACHED MEDICAL PHYSICAL FORM COMPLETED BY A LISCENED PHYSICIAN PRIOR TO THEIR APPLICATION BEING PROCESSED. ALL APPLICANTS MUST ALSO HAVE THE ATTACHED STATE POLICE BACKGROUND CHECK AND CHILD ABUSE HISTORY CHECKS COMPLETED BEFORE THEIR APPLICATION WILL BE PROCESSED. **ALL CLEARENES AND PHYSICALS WILL BE AT THE COST OF THE APPLICANT.** APPLICANTS UNDER THE AGE 18 MUST ALSO PROVIDE A COPY OF THEIR WORKING PAPERS. YOU CAN CONTACT THE BRISTOL TOWNSHIP SCHOOL DISTRICT ADMINISTRATIVE OFFICES FOR INFORMATION ON HOW TO FILE.