



Butler Volunteer Fire Company Membership Application

PO BOX 75 * 15019 Falls Road

Butler, Maryland 21023

(410)887-7913

\$25.00 APPLICATION FEE REQUIRED

Date of Application: _____

Application Type: _____ Fire _____ Associate

APPLICANT INFORMATION

Name: _____
(Last) (First) (MI)

Current Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

How long at current residence: _____

Previous Address (if less than 2 years): _____ Apt: _____

City: _____ State: _____ Zip: _____

Telephone: Home: _____ Cell: _____

Email Address: _____

Date of Birth: _____

Social security Number: _____

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DRIVER LICENSE INFORMATION

State of Issue: _____ Class: _____ License No: _____

Year Issued: _____

Have your driving privileges ever been suspended or revoked? Circle One: YES NO

If yes, please explain fully: _____

CRIMINAL BACKGROUND INFORMATION

Have you ever been convicted of a felony? _____

If yes, please provided all pertinent information, including date of conviction, charges, outcome and disposition etc: _____

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PREVIOUS EXPERIENCE

Do you now or have you ever belonged to a Baltimore County or any other Fire, EMS, or Rescue Company either Career or Volunteer? _____

If applicable, please provide your BCoFD ID number: _____

If yes, please list the company name(s) and date(s) of membership / employment:

Company 1: _____

Address: _____

City: _____ State: _____ Zip: _____

Supervisor Name and Title: _____

Telephone: _____ Member Dates: _____

Reason for leaving: _____

Company2: _____

Address: _____

City: _____ State: _____ Zip: _____

Supervisor Name and Title: _____

Telephone: _____ Member Dates: _____

Reason for leaving: _____

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Please list all completed courses, training, and certifications including dates: _____

Have you ever been rejected, suspended, or expelled from this or any other Fire, EMS, or Rescue Company (Career or Volunteer)? _____

If yes, please provide all pertinent information including dates: _____

REFERENCES

List names of three (3) people not related to you, whom you have known for at least three (3) years and who are not members of the Butler Volunteer Fire Company:

NAME

ADDRESS

TELEPHONE

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I, the undersigned, make application to become an active member of the Butler Volunteer Fire Company.

I, the undersigned, do promise to abide by all the laws and rules governing the Butler Volunteer Fire Company, either in effect or to become effective by vote of the membership.

I, the undersigned, understand that the Butler Volunteer Fire Company, at its expense shall undertake an investigation into my background and that I may be required to appear before the Membership Investigation Committee.

I, the undersigned, understand should my application for membership be accepted by the Members of the Butler Volunteer Fire Company, I shall be on a six-month Probationary Period. At the end of such period, I understand that I will be voted in again by the Members of the Butler Volunteer Fire Company, to become a Regular Member of the Company. I also understand that to be considered for permanent membership, I must actively support community fund raisings, take part in training and attend company meetings.

Signature of Applicant

Date

Parent/Guardian