

# Singerly Fire Company

## Application for Associate Membership

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Phone: \_\_\_\_\_ (Cell: ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Present Address: \_\_\_\_\_ Residing How Long

Mailing Address: \_\_\_\_\_

Previous Address: \_\_\_\_\_ Residing How Long

### EMPLOYMENT

Present Employer: \_\_\_\_\_ Phone Number

Address: \_\_\_\_\_

Position: \_\_\_\_\_ Length of Time:

Do you, or did you hold membership in other volunteer organizations?

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### Military or Reserve Record

Branch of Service: \_\_\_\_\_ Rank: \_\_\_\_\_

Dates:	From	To	Type of Discharge

Except for Minor Traffic Violations Have You Been Arrested for Violation of Any Law?

Yes	No

Were you convicted?

Disposition and Dates: \_\_\_\_\_

Please Provide Explanation: \_\_\_\_\_

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Have you ever been Dismissed or Refused Membership  
in any Fire Company?  
Fraternal Organization or Service Club?

Yes	No

Please provide explanation: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### REFERENCES

Provide the Name, Address, Phone Number of People you have known for at least 3 Years  
*No Family or Relatives*

1 \_\_\_\_\_ Years Known

2 \_\_\_\_\_ Years Known

May we check the information provided on this form? Yes \_\_\_\_\_ No \_\_\_\_\_

Give an explanation why you desire Associate membership in Singerly Fire Company:  
 \_\_\_\_\_  
 \_\_\_\_\_

### Article 18 ASSOCIATE MEMBERSHIP

Associate membership shall be available for those who wish to be affiliated with the fire company, with no duties. Discrimination shall be prohibited in membership and other activities on the basis of race, religion, sex, or national origin.

To be eligible for associate membership, an applicant must be at least 21 years of age; his application must be approved by vote of the board of directors.

Associate members shall have no required duties (except those for which they may volunteer) and shall not be eligible for performance of emergency duty.

Payment of dues in the amount of \$15.00 yearly shall be required (by January 31 for the succeeding fiscal year). Associate members shall have all privileges of membership, except voting.

Associate membership may be terminated by (1) resignation, (2) for delinquency of more than two years in payment of dues, or (3) for cause, by vote of the board of directors. **Article 18 Associate Membership**

**If my affiliation with SFC should be terminated for any reason, I agree to remove SFC insignia, signs, etc., from clothing and automobile. I agree to return to the fire company any keys or equipment in my possession. I declare that statements in this application and in accompanying papers have been examined by me and to the best of my knowledge and belief are true and correct.**

\_\_\_\_\_ Date

Signature: \_\_\_\_\_