



CHAROTIN HOSE COMPANY, NO. 1

4th & Arch Streets · North Catasauqua, PA 18032

Phone 610-266-1969 · Emergency Phone **911**

Application for Membership

Active Firefighter Fire Police Active Auxiliary

Date _____ Sponsor _____

Name _____ SS# _____ - _____ - _____

Address _____

City _____ State _____ Zip _____

Phone _____ Date of Birth _____ Age _____ Gender _____

Driver's License State _____ Number _____

General Information

1. Have you ever been a member or are you currently a member of any fire department or ambulance corps in good standing? If yes, identify organization, number of service years, and a contact to verify.

2. Do you have any emergency services training? If yes, please list. Use back of this application if you need more space.

3. Have you ever been convicted of a crime? If yes, please explain. Use the back of this application if you need more space.

4. Do you have physical or mental handicaps do you have that would prevent you from doing your job, in any way?

I hereby apply for active membership in the Charotin Hose Co. No. 1 of North Catasauqua, PA. If accepted I agree to abide by the rules and by-laws of said company. Attached hereto are \$5.00 initiation fees and dues required by the by-laws. Further, I agree that all above statements are true, to the best of my knowledge, on this _____ day of _____, _____.

Applicant's Signature

Parent/Guardian Signature (if applicant is a minor)