

**Norriton Fire Engine Company**  
**2830 Swede Road**  
**East Norriton, PA 19401**  
**(610) 279-3456**

**APPLICATION FOR MEMBERSHIP**

Membership Type:    Regular – Age 18+ ( )            Junior – Age 16-17 ( )

**PERSONAL INFORMATION**

Name: \_\_\_\_\_ Home Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_  
\_\_\_\_\_ Date of Birth: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
\_\_\_\_\_ Sex:    Male ( ) Female ( )

**EMPLOYER INFORMATION**

Employer Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Address: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
\_\_\_\_\_ E-mail Address: \_\_\_\_\_

**VEHICLE/LICENSE RECORD**

State: \_\_\_\_\_ Vehicle Make, Model, and Year: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_  
Class: \_\_\_\_\_ Expiration: \_\_\_\_\_ Registration Number: \_\_\_\_\_  
Restrictions: \_\_\_\_\_

**MEDICAL RECORD**

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Date of Last Physical: \_\_\_\_\_

Blood Type: \_\_\_\_\_

Medications: \_\_\_\_\_

Allergies: \_\_\_\_\_

**BENEFICIARY**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\_\_\_\_\_

**EMERGENCY CONTACTS**

Primary Contact

Alternate Contact

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

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

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**GENERAL INFORMATION**

Have you ever been discharged from or refused entry to any other emergency service organization? Yes ( ) No ( )

If yes, what organization? \_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a crime? Yes ( ) No ( )

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Do you speak, read, or write any foreign languages? Yes ( ) No ( )  
If yes, what  
languages: \_\_\_\_\_  
\_\_\_\_\_

**CRIMINAL RECORD CHECK**

**A PA Criminal Record Check and a PA Child Abuse Clearance are required to be submitted with this application. Applicants cannot be considered for membership without submitting these required background checks.**

You may obtain these here:

PA Criminal Record Check: [www.epatch.state.pa.us](http://www.epatch.state.pa.us)

PA Child Abuse Clearance: [www.compass.state.pa.us/cwis](http://www.compass.state.pa.us/cwis)

**REFERENCES**

List three (3) references, not related to you, that we may contact for a personal reference.

- 1. \_\_\_\_\_ Phone: \_\_\_\_\_
- 2. \_\_\_\_\_ Phone: \_\_\_\_\_
- 3. \_\_\_\_\_ Phone: \_\_\_\_\_

List any and all fire, ambulance, or police organizations to which you have belonged:

Organization: \_\_\_\_\_ Phone: \_\_\_\_\_  
Officer in charge during your affiliation: \_\_\_\_\_

Organization: \_\_\_\_\_ Phone: \_\_\_\_\_  
Officer in charge during your affiliation: \_\_\_\_\_

Organization: \_\_\_\_\_ Phone: \_\_\_\_\_  
Officer in charge during your affiliation: \_\_\_\_\_

List emergency service training (fire, ambulance, police, etc.):

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List any other skills that you would consider a benefit to our organization:

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NORRITON FIRE ENGINE COMPANY APPLICATION FOR MEMBERSHIP  
CERTIFICATION

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if accepted, any false statement shall be grounds for dismissal.

I authorize the Norriton Fire Engine Company to investigate any or all information on this application, and hereby authorize the named references to disclose such information, personal or otherwise as requested during this investigation. I agree to release all parties from all liability as a result of the disclosure of the requested information.

I understand that, if accepted, my membership is governed by the charter, bylaws, constitution, rules, and regulations of the Norriton Fire Engine Company.

I have also submitted a copy of the criminal background check.

If this is a Junior membership, a copy of the application for or a copy of the actual working papers must be presented at the interview.

Print Name: \_\_\_\_\_

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

Parent/Guardian Name: \_\_\_\_\_

(Required for Junior Membership)

Parent/Guardian Signature: \_\_\_\_\_

(Required for Junior Membership)

Date: \_\_\_\_\_