

**Glasco Fire Company #29  
PO Box 157 • Glasco, NY 12432**

**APPLICATION FOR MEMBERSHIP**

Thank you for applying for membership to the Glasco Fire Company, #29. Your volunteering to help others in need is greatly appreciated and adds to the effectiveness of our community service.

Enclosed is your application. Please read the application. Please be sure to answer all questions on the application. Failure to do so may result in delays for processing your application.

Please return your completed application to the address below and enclose a check or money order for the amount of \$5.00, made out to **Glasco Fire District. NO CASH PLEASE.** The fee is for processing your application and for your tentative first years membership dues. Our address is as follows:

**Attn: Fire Chief  
Glasco Fire District  
PO Box 157  
Glasco, NY 12432**

When we receive your application, it will be reviewed for completion. You will then be contacted for an interview. A criminal history check will also be completed by the Department of Criminal Justice (DCJS) for any Arson Conviction before being accepted as a member of the Glasco Fire Company #29.

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**APPLICATION FOR MEMBERSHIP**

1. NAME: \_\_\_\_\_

2. ADDRESS: \_\_\_\_\_

3. DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

4. SEX: \_\_\_\_\_ RACE: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

5. PHONE NO.: \_\_\_\_\_

6. SOCIAL SECURITY: \_\_\_\_\_

7. MARITAL STATUS: Married \_\_\_\_\_ Single: \_\_\_\_\_ Other: \_\_\_\_\_

8. LIST NAME & PHONE NUMBER TO CONTACT IN CASE OF EMERGENCY:

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

9. EMPLOYER INFORMATION:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

NAME OF SUPERVISOR: \_\_\_\_\_

10. DO YOU HAVE A DRIVER'S LICENSE? Yes: \_\_\_\_\_ No: \_\_\_\_\_

*If you answered yes, complete the following:*

ID#: \_\_\_\_\_

STATE: \_\_\_\_\_ CLASS: \_\_\_\_\_

11. HAVE YOU BEEN CONVICTED OF ANY CRIMES WITHIN THE LAST 10 YEARS?

Yes: \_\_\_\_\_ (If Yes, Please explain below) No: \_\_\_\_\_

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12. DO YOU HAVE ANY TRAINING IN FIREMATICS, FIRST AIR OR RESCUE WORK?

Yes: \_\_\_\_\_ (If Yes, Please explain below) No: \_\_\_\_\_

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13. PLEASE EXPLAIN WHY YOU WANT TO JOIN THE GLASCO FIRE CO. #29?

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***I understand that any information that is found not to be true or any omissions of information may lead to disqualification as a member of the Glasco Fire Company #29.***

APPLICANTS SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_