



FIRE CADET MEMBERSHIP APPLICATION

Last Name: _____ M: _____ First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone No: _____ Cell Number: _____

Social Security No: _____ Drivers Lic. No. _____

Date of Birth: _____ Male _____ Female _____

E-mail address: _____

Occupation: _____

Employer: _____

Work No.: _____ Work Hours: _____

Call from Work: Y/N

Emergency Contact: _____

Name: _____ Phone No. _____

Address: _____

Health Condition/Allergies:

List:

PERSONAL GEAR ISSUED

Coat Size: _____ Helmet Size: _____

Boot Size: _____ Glove Size: _____

Shirt Size: _____ Bunker Pants Size: _____

Car Plates: _____ Hood: _____

Pager No. _____ Red Book: _____

Misc: _____

**CURRENT SCHOOL(S) ATTENDING OR OTHER CLASSES PERTAINING TO
FIRE SERVICE**

1. _____

2. _____

3. _____

Teacher Recommendation:

Name: _____ Subject: _____ Date: _____

Comments: _____

Name: _____ Subject: _____ Date: _____

Comments: _____

I know this information to be true and correct

Applicant's Signature

Date