



## Bittering Volunteer Fire Department Inc.

176 Brennenman Road | Bittering, MD 21522  
Phone- 301-245-4414 | Email- co90@gc911.org



### Membership Application

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

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

DOB: \_\_\_\_\_ Phone #: \_\_\_\_\_ Cell: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ Class: \_\_\_\_\_

Has your license ever been suspended or revoked? \_\_\_\_\_ "yes" please explain in detail:

\_\_\_\_\_  
\_\_\_\_\_

### Emergency Contact

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Current Employer

Name: \_\_\_\_\_ Contact # \_\_\_\_\_

### Education

High School \_\_\_\_\_ Date Graduated: \_\_\_\_\_

College: \_\_\_\_\_ Date Graduated: \_\_\_\_\_

Other: \_\_\_\_\_ Date Graduated: \_\_\_\_\_

### References (Please give two who are not related to you):

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

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

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

Fire Department / EMS / Other Experience (Include Department, State, last day, length of service, certification):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are you currently a member of any other Fire or EMS organization? \_\_\_\_\_



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### Medical Background

Do you have physical, mental or emotional sickness, illness, disease, disorder, injury, malady or condition that would prevent you from fully and safely performing the duties of a firefighter or EMS provider? \_\_\_\_ YES \_\_\_\_ NO. "YES" please provide complete details.

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### Pre-membership Physical Examination

This is to certify that the applicant named herein has been examined by a medically approved facility and is in conformance with DOT and OSHA requirements.

Facility Name \_\_\_\_\_ Physician \_\_\_\_\_

Date of Examination \_\_\_\_\_ Physician Signature \_\_\_\_\_

Restrictions / Notes

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### Violations

Have you ever been convicted of a felony or misdemeanor other than a minor traffic violation? \_\_\_\_ Yes \_\_\_\_ No Are you registered or are you required to register on any national or state sex offender registry or similar database of sex offenders? \_\_\_\_ Yes \_\_\_\_ No A conviction does not automatically mean that you cannot be accepted as a member. The type of conviction and how long ago it happened is important. Please give us all the facts if answered "YES" to either question.

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### Notice to Applicant

If accepted into membership of the Bittering Volunteer Fire Department, (BVFD), I agree to abide by the BY-LAWS and Standard Operating Procedures (SOP) of the Department as they may be amended from time to time, I understand that I will be on probation for the term of 6 months and at that time, I will be reevaluated by the Department for full membership, continued probation or termination. I hereby accept the responsibility for all property issued to me throughout the course of my membership and understand that I am required to return all Department property upon request or upon termination of membership. I also understand that my joining the Department is presumed to be "at will"; that is, the Department is free to discharge individuals "for good cause or bad cause, or no cause at all," and that I am equally free to resign or otherwise cease to be a member of the Department. If applicant is between the ages of 16 and 18 he/she must follow all the BYLAWS associated with the Junior Cadet program pertaining to education and maintaining a "C" average in school. A request of a report card may be made by the department prior to applicant being accepted as a probationary member. The applicant will remain a probationary member until he/she turns 18 years of age. The applicant must be in probationary status for at least 6 months.

I certify that I have received a copy of the Bittering Volunteer Fire Department's By-Laws and have read and fully understand the meaning and contents of said document.

I hereby authorize the Bittering Volunteer Fire Department to conduct a personal background investigation including school attended, former and present employers, and residences, named references, criminal and motor vehicle record check in connection with my application for membership.

I further understand that the misrepresentation or omission of facts called for in this application process is cause for Lack of Acceptance or dismissal. Further, I understand and agree that membership is for no definite period and may be terminated at any time without previous notice. I understand that I do not have a contract or employment and no one is authorized to make such a promise.

By signing below, I certify that the information provided on this application is accurate and complete.

**Applicants Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicants Parent/Guardian**

**(If under 18) Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Received By (BVFD):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**BVFD Use Only:**

**Signature:** \_\_\_\_\_ **Accepted:** \_\_\_\_ **Denied:** \_\_\_\_ **Date:** \_\_\_\_\_