



Reese and Community Volunteer Fire Company Junior Firefighter Program

Membership Application

| | | | |
|--|------------|---------------------|-------------|
| Last Name | First Name | Middle Name | |
| Address | | | |
| City | State | Zip Code | Telephone # |
| Male/Female | Birth Date | Age | |
| Your E-Mail (if you don't have one, type N/A): | | | |
| _____ | | | |
| Parent/Guardian Email: | | | |
| _____ | | | |
| Emergency Point of Contact Information | | | |
| Parent or Guardian (Printed) | | | |
| Phone Number: Other Phone Number: Parent or Guardian (Printed) | | | |
| _____ | | | |
| Phone Number: | | Other Phone Number: | |
| _____ | | | |
| Other Emergency Contact: | | | |
| Name: | | | |
| Phone Number: | | Other Phone Number: | |

Membership is limited to those persons, ages 10-15.

You must have a "C" average or better in school and be able to provide a report card each quarter.

For more information, call 443-829-7344, and ask for the Junior Firefighter

References:

Please list anyone you know in the Reese and Community Volunteer Fire Company:

1. _____

2. _____

Tell us a little about yourself. What do you want to get out of the program?

Are you involved in any extracurricular activities (i.e. sports, band, volunteer opportunities):

Uniform: (Please tell us what size you currently wear.)

Shirt: _____ Pants: _____ Hoodie: _____ Shoes:

What school do you currently attend? _____

Do you have any allergies that would require emergency medical assistance (i.e. tree nuts and/or latex, bee stings) Please provide as much detail as possible. If none, write N/A

Parents:

I certify that my son/daughter _____,

_____ years of age, may join the Junior Firefighter Program of the Reese and Community Volunteer Fire Company Inc., and do hereby release, exonerate and discharge the said Reese and Community Volunteer Fire Company, Inc. and its agents, servants and employees from any and all claims and demands which I may have in the future by reason of any injury or damage to my said child for any reason whatsoever.

Signature of Parent or Guardian

Date

Please see the attached PHOTOGRAPH WAIVER & RELEASE form

For Membership Committee Use Only:

Date Received:

Date Interviewed:

Interviewed by:

Remarks:

Reese VFC, Junior Program, 1745 Baltimore Blvd., Westminster Maryland 21157

PHOTOGRAPH/VIDEO RELEASE AND WAIVER

I, _____ (Parent/Guardian)

of _____ (Child)

1. CONSENT to the use, publication and reproduction by Reese Volunteer Fire Company, its employees, volunteers, officers and agents of photographs and/or videos of my child for the purposes of advertising, social media, general display or for any other purposes Reese Volunteer Fire Company in whole or in part, including on the Reese Volunteer Fire Company website, social media outlets, or publications.
2. AGREE that the use, publication and reproduction of the photographs and/or videos may occur by medium, including but not limited to newspapers, brochures, flyers, websites and social media outlets.
3. AGREE that the rights to Reese Volunteer Fire Company under this release and waiver form are perpetual and I hereby waive any interest my child or I may have in the copyright to the photographs and/or videos now or at any time in the future. I acknowledge that neither my child nor I expect to receive any payment or any other consideration in connection with the taking, use or storage of the photographs and/or videos.
4. ACKNOWLEDGE and agree that any use of the photographs and/or videos is, at the date of publication, made in good faith and is not intended to defame or offend my child or bring my child's reputation into disrepute.
5. RELEASE the Reese Volunteer Fire Company, its employees, volunteers, officers and agents from any liability (including consequential loss) connected with the publication, reproduction, or release of the photographs and/or videos.

Parent/Guardian Signature: _____

Date: _____

Reese Volunteer Fire Company Representative Signature: _____

Date: _____