

JUNIOR HUGHSONVILLE FIREFIGHTERS

Please fill out all information accurately. A consent signature by a parent or legal guardian must be included for all applicants under the age of 18. Filling out this application is not a guarantee of acceptance into the Junior Hughsonville Firefighters. Annual dues and uniform fees will be collected upon joining once the candidate has been approved.

Name: _____

 Last First Middle

Address: _____
Street
Town
Zip Code

Date of Birth: _____ Age: _____ Gender: _____ Grade: _____

School: _____

Home Phone # () _____ - _____

Youth Mobile # () _____ - _____

Youth Email: _____@_____._____

Emergency Contact: _____ Relationship: _____

Address: _____

Mobile # () _____ - _____

Alternate Phone # () _____ - _____

Parent/Guardian Email: _____@_____._____

Youth Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Parental Consent

My son/daughter, _____, has my permission to be a member of the Junior Hughsonville Firefighters. I give my consent to allow _____ to be a Junior Firefighter and do not hold the Hughsonville Fire Department or the Town of Wappinger responsible for any actions caused by my son/daughter that is not under the direction of an JHF Advisor or HFD firefighter.

JHF Member Signature & Date

Parent/Guardian Signature & Date

Contract of Understanding

My son/daughter and I have read all of the JHF Bylaws/SOP and understand the guidelines set up to outline the purpose of the program.

My son/daughter and I understand that JHF members serve as supporters of the Hughsonville Fire Department to learn the basics of firefighting.

My son/daughter and I understand that Junior Firefighters are to follow all instructions from members of the HFD and that the general standard of conduct is to act in the manner of a professional. My son/daughter and I understand that they are expected to be courteous and respectful of other members and to all citizens as they are representing the HFD.

My son/daughter and I understand there are "zero tolerance" policies regarding firesetting and drug and/or alcohol use.

My son/daughter and I understand that by signing this Contract of Understanding we are declaring that any violation of the guidelines may be grounds for immediate dismissal.

My son/daughter and I understand that any acts that are illegal under New York law will be referred to the appropriate authorities.

JHF Member Signature & Date

Parent/Guardian Signature & Date

Acknowledge Receipt of Guidelines

I acknowledge that I and my son/daughter have received a copy of the Hughsonville Junior Firefighters Program Guidelines and have reviewed them prior to signing these documents.

JHF Member Signature & Date

Parent/Guardian Signature & Date

Lead Advisor Approval:

Date: _____