COLONIE FIRE COMPANY

1631 CENTRAL AVENUE ALBANY, NY 12205 (518) 869-9306

APPLICATION FOR MEMBERSHIP

	DATE:			
1.	NAME:			
2.	ADDRESS:			
	CITY: STATE: ZIP CODE:			
3.5	SOCIAL SECURITY NUMBER: 4. DOB:			
5.H	5.HOME PHONE: WORK PHONE:			
6.	6. How long have you resided at the above address? YearsMonths			
7.	How long have you resided in New York State? Years Months			
8.	Are you currently employed? Yes No			
	If "yes" give employer information below. Name of CompanyPosition Held Address:Phone: May we contact your employer? Yes No If "no" are you a student? Yes No			
9.	Do you have a valid New York State Drivers License? Yes No Restrictions (if any) Expiration Date			
10	. Do you have any physical disabilities, impairments, or known medical problems? Yes No			
	If "ves", please explain:			

11.	Next of Kin:	Relationship:
	Address:	Phone:
12	Emergency	Contact (if different than item 11):
	Address:	Phone:
13.	insurance fra	ver been convicted of or pled guilty to a felony, misdemeanor, aud, arson, or a reduction of one of these offenses? Yes_No_ ise explain:
14.	Name of Ag	nergency Service experience (include only fire, rescue & EMS): ency:
	Contact Per	son:Phone:
15.	List three pe have known A.Name:	ersonal references, other than members of this organization, who you for at least 3 years: Phone:
		Phone:
		Phone:
Compeligible the Vilive w	pany. Residents of the for only active cate illage of Colonie and	cter and standing, of age eighteen (18) or over shall be eligible to be accepted to active membership in the the Village of Colonie between the ages of eighteen (18) and forty-five (45) and physically fit shall be egories except as provided for elsewhere in our constitution. All applicants must meet the requirements of of the State of New York. Applicants for active service who live outside the Village of Colonie must either e of the siren or the range of the alerting system located at the Colonie Village Fire House, or work full colonie.
	ANY FA	LSE STATEMENT WILL VOID THIS APPLICATION
Sig	nature:	Date: