

Date: ___/___

Palmer Engine & Hose Co. (Kinderhook Fire Department)

39 Chatham St. P.O. Box 191 Kinderhook, NY 12106-0191

Application for Membership

| I here | by make application for active |
|--|----------------------------------|
| membership in the Palmer Engine & Hose | e Co. and promise to comply with |
| all company by-laws, rules and regula | tions if voted in. |
| | |
| I understand the following section | ns of the company's by-laws |
| specifically apply and must be observe | ed: |

Article VII, Section 1: Any active member voted into the company must comply with the officers checklist as specified in Article IV, Section 3 and must attend a NYS certified course as deemed appropriate by the Chief within the first two years or be subject to expulsion as specified in Article X, Section 2.

Article VII, Section 2: It shall be the duty of every active member to respond to as many alarms of fire, to attend as many fire drills and to attend as many meetings as possible. It is the duty of every active member to discharge all duties assigned by the commanding official and to use the utmost endeavors to prevent improper use of the company's property.

I give the Palmer Engine & Hose Co. permission to do a complete background check on me which may include arson, sex offender history and criminal background.

| I | authorize | you to | contact | the | fol | lowing | people | as | a | personal |
|---------------------------|------------|-----------|-----------|--------|-------|----------|----------|-------|----|----------|
| ref | erences of | my char | acter, mo | orals | and | ethics: | | | | |
| (A) | Name: | | | | | Rela | tionship | o: | | |
| | Address: | | | | | | | | | |
| | | | | | | | | | | |
| | Phone #: | | | | | | | | | |
| (B) | Name: | | | | | Rela | tionship | o: | | |
| | Address: | | | | | | | | | |
| | | | | | | | | | | |
| | Phone #: | | | | | | | | | |
| (C) Name: Relationship: _ | | | | | | | | | | |
| | Address: | | | | | | | | | |
| | | | | | | | | | | |
| | Phone #: | | | | | | | | | |
| The | position | | | | | | | | | |
| | () Inte | rior Fir | efighter | | () | Exteri | or Fire | Eight | er | |
| | () Fire | Police | | | () | Ladies | Auxilia | ary | | |
| Hav | e you ever | been in | or prev | iously | / арр | olied fo | r membe: | rship | at | another |
| fir | e departme | nt? | | | | | | | | |
| | () Yes | | | | (|) No | | | | |
| Ιf | yes, what | departme | nt(s), he | ow lon | ng ar | d why d | id you] | Leave | ? | |
| | Departmen | t: | | | | How | long: | | | |
| | Reason | for leav | ing: | | | | | | | |
| | Departmen | | | | | | | | | |
| | Reason | for leav | ing: | | | | | | | |
| Ple | ase tell u | ıs in a i | ew words | s why | you | are as | king to | join | th | e Palmer |
| Eng | ine & Hose | Co | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

If accepted, I acknowledge that I will have to get a physical before responding to any alarm and that I will get one every year thereafter. The department will incur the cost of the physical.

I hereby signify that I am physically and mentally fit to perform such duties as my membership shall require.

| Signature: | Age: | |
|------------|--|----|
| Date of Bi | rth: Social Security #: | |
| Occupation | : | |
| Address: _ | | |
| | Work #: | |
| (A : | fee of \$10 must accompany this application) | |
| *====== | | =* |
| Applicatio | n was received and read at trustees meeting on | |
| | wing Trustees have screened the above applicant and the thick that he signature and the signature of the sig | |
| (1) | | |
| | | |
| | | |
| | | |
| (5) | | |
| | was voted on at the company meeting held on | |
| and was: | Accepted () Declined () | |