

MORGAN CO. EMERGENCY AND RESCUE SQUAD, INC.

Application for Membership

The Morgan County Rescue Squad has a long standing tradition of honor, pride, and distinction. In order to be considered for membership in this organization, please fill out the questionnaire below in its entirety. If more room is needed, please use the back of this form.

NAME: _____ PHONE #: _____

ADD1: _____ CELL #: _____

ADD2: _____ BIRTH: _____

CITY: _____ STATE: _____ ZIP: _____

Email Add: _____ Last 4 digits of Social _____ Dri. License # _____

Have you ever been convicted of a felony? Y N Hair _____ Eyes _____ Ht _____ Wt: _____

Present Employment: _____ Address: _____

Do you have a radio with rescue frequency? Y N Do you have bunker gear? Y N

Organizations belonged to: *(Fire Depts., Clubs, Churches, etc.)*

In the event of an emergency, when would you be able to respond: DAY: NIGHT: BOTH:

Area you would be able to respond: COUNTY WIDE LOCAL COMMUNITY ONLY

Special Training or Skills: *(Check all that apply)*

Paramedic:	<input type="checkbox"/>	Fire Fighter:	<input type="checkbox"/>	Driver Training	<input type="checkbox"/>	Mechanic	<input type="checkbox"/>
EMT:	<input type="checkbox"/>	Auto Extrication:	<input type="checkbox"/>	Carpenter:	<input type="checkbox"/>	Map, Compass, GPS	<input type="checkbox"/>
First Responder:	<input type="checkbox"/>	Rapelling:	<input type="checkbox"/>	Welder:	<input type="checkbox"/>	Boat Driver:	<input type="checkbox"/>
CPR:	<input type="checkbox"/>	Scuba Diving:	<input type="checkbox"/>	Logger:	<input type="checkbox"/>	Truck Driver:	<input type="checkbox"/>
First Aid:	<input type="checkbox"/>	Haz Mat	<input type="checkbox"/>	Heavy Equipment:	<input type="checkbox"/>	Other:	_____

Please list personal qualities you have that would make you a good member of "The Morgan County Rescue Squad". Why do you want to be a member and why should we consider you above all others. *(Use the back if needed)*

Upon signing this application, I attest that I will abide by the By-Laws and Standard Operating Procedures of the Morgan County Emergency & Rescue Squad, Inc., and that I am a member of good standing of my community. I also give my permission for a background check to be performed and my image to be used on electronic media.

(Applicant Signature)

(Date)