



# Queenstown Volunteer Fire Company Inc.

## Membership Application



## **Introduction**

Thank you for your interest in joining the Queenstown Volunteer Fire Company, Inc.

## **Requirements:**

Applicants must be at least 16 years of age at the time they are voted into the Company.

Applicants under the age of 18, must provide written permission from a parent, or their legal guardian.

Applicants must provide a copy of their Maryland (or applicable state) driver's license.

## **Process:**

All applicable forms in the application packet must be completed in their entirety, except for the beneficiary, and LOSAP form. Members will be notified when to complete those forms.

The application packet is to be submitted to a member of the Membership Committee.

The 2022 Membership Committee members are:

J.T. Lewis      Chairman  
Frank Russum  
Jamie Lewis  
Timothy Palmer  
Chris Pinder  
Taylor Oldershaw  
Matt Rusch

## **Interview:**

Prior to being introduced to the Company, the applicant will meet with the members of the Membership Committee.

During the interview, the Membership Committee will explain the application process, the probationary period, and what is required of all applicants.

During the interview, the Membership Committee will ask the applicant various questions, and allow the applicant an opportunity to ask any questions.

After the interview is complete, the Membership Committee will meet privately, and discuss the applicant. The Membership Committee, by a majority of Committee members present, will decide on a recommendation on the applicant, to be presented to the Company.

### **Introduction to the Company:**

At the first business meeting that the applicant attends, a member of the Membership Committee, will introduce the applicant to the members of the Company, present at the meeting. The applicant may not vote on any Company issues, brought forward during that meeting.

### **Voting on the Applicant:**

At the second meeting that the applicant attends, the President will call the meeting to order.

When the President calls for a Membership Committee report, the applicant will be asked to leave the meeting room. The Membership Committee will report to the Company, any pertinent information learned about the applicant.

The Membership Committee will then make a recommendation to the Company. The Committee will recommend either:

1. The applicant be voted in as a probationary member or
2. The applicant be denied probationary membership

The active and life members present at the meeting, will then vote by written ballot, based on the recommendation made by the Membership Committee.

### **Results:**

The ballots will be counted immediately following the vote.

If the applicant receives a two-thirds favorable vote, the applicant will become a probationary member.

If the applicant fails to receive a two-thirds favorable vote, the applicant does not become a probationary member, and must wait for a period of at least one year, before he/she can reapply for membership.

The applicant will return to the meeting room and be informed as to the results of the Company's vote.

### **After Six Months:**

At the six month point of the members probationary period, the Membership Committee will meet and discuss the members status to that point.

The member is not required, but is encouraged to attend this meeting, as the Membership Committee will discuss any issues that may be brought forward, regarding the members progress to that point.

### **After One Year:**

At the conclusion of the initial one-year probationary period, the Membership Committee will again meet, and discuss the progress made by the member, during their probationary period.

At the next business meeting, following the conclusion of the probationary period, the President will call the meeting to order.

When the President calls for any Membership Committee reports, the applicant will be asked to leave the meeting room. The Membership Committee will report to the Company, the progress made by the member, during their probationary period.

The Membership Committee will then make a recommendation to the Company. The possible recommendations are:

1. To vote the member into the Company as a full member
2. To extend the members probationary period for one year
3. To remove the member from membership

The active and life members present at the meeting, will then vote by written ballot.

### **Results:**

If the member receives a two-thirds favorable vote, he/she becomes a full member of the Company.

Any member failing to receive the necessary two-thirds favorable vote to become a full member, or to have their probation extended, he/she will be removed from membership, and must wait for a period of at least two years, before he/she can reapply for membership.

The member is not required to attend this meeting for a vote to occur.

**Queenstown Volunteer Fire Company, Inc.  
7110 Main Street, P.O. Box 118  
Queenstown, Maryland 21658**

**Membership Application**

To the Officers and Members of the Queenstown Volunteer Fire Company, Inc:

I hereby make an application for probationary membership within the: (check one or multiple)

- Fire Department
- EMS Department
- Associate Membership

**Full Name:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_  
\*Include physical address if you use a P.O. Box\*

**How long have you lived at this address?** \_\_\_\_\_

**Previous Address:** \_\_\_\_\_  
\*Only if you have lived at your current address less than 3 years\*

**Date of Birth:** \_\_\_\_\_ **Social Security Number:** \_\_\_\_\_

**Marital Status:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Address of emergency contact:** \_\_\_\_\_

**Applicants Contact Numbers:**

Home: \_\_\_\_\_  
Work: \_\_\_\_\_  
Cell: \_\_\_\_\_  
Other: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_

**Occupation:** \_\_\_\_\_ **Name of employer:** \_\_\_\_\_

How long have you been employed by the above: \_\_\_\_\_ What hours do you work: \_\_\_\_\_

**Driver's License:**     *(Reminder: A certified copy of your driving record is required)*

Do you have a valid driver's license:   \_\_\_ Yes       \_\_\_ No

State of issue: \_\_\_\_\_  
Soundex #: \_\_\_\_\_  
Class: \_\_\_\_\_  
Expiration: \_\_\_\_\_

Have your driving privileges ever been suspended/revoked/cancelled in any state?

\_\_\_ Yes       \_\_\_ No       If yes, explain: \_\_\_\_\_

Have you ever been convicted of any motor vehicle violations, other than parking violations?

\_\_\_ Yes       \_\_\_ No       If yes, explain: \_\_\_\_\_

**Criminal Record:**

Have you ever been convicted of any criminal offense(s)?

\_\_\_ Yes       \_\_\_ No       If yes, explain: \_\_\_\_\_

Have you ever been given a Probation Before Judgement (PBJ) in any criminal proceedings?

\_\_\_ Yes       \_\_\_ No       If yes, explain: \_\_\_\_\_

Are you currently on parole or probation:

\_\_\_ Yes       \_\_\_ No       If yes, explain: \_\_\_\_\_

**References:**

List three personal references:

1. Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

2. Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

3. Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

**Prior Experience:**

Are you now, or have you ever been a member of any Volunteer Fire or EMS Company?

\_\_\_ Yes      \_\_\_ No

If yes: The Name of the Organization: \_\_\_\_\_

Their Address: \_\_\_\_\_

Your current status: \_\_\_\_\_

Years of service: \_\_\_\_\_

List any offices held: \_\_\_\_\_

\_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Have you ever been refused membership to any Volunteer Fire or EMS Company?

\_\_\_ Yes      \_\_\_ No      If yes, explain: \_\_\_\_\_

List any pertinent training courses in Fire/EMS that you have successfully completed:

1. \_\_\_\_\_ Date: \_\_\_\_\_

2. \_\_\_\_\_ Date: \_\_\_\_\_

3. \_\_\_\_\_ Date: \_\_\_\_\_

4. \_\_\_\_\_ Date: \_\_\_\_\_

5. \_\_\_\_\_ Date: \_\_\_\_\_

(Please attach copies of all certificates)

## **Applicants Under Eighteen Years of Age**

All applicants under the age of eighteen, must have written permission from their parent or legal guardian, to join the Queenstown Volunteer Fire Company, Inc.

I hereby give \_\_\_\_\_ permission to join the Queenstown Volunteer Fire Company, Inc. and to participate in the activities of the Queenstown Volunteer Fire Company Inc.

I understand that a complete background investigation will be completed, and that this application may be refused for any reason, deemed appropriate by the membership of this organization.

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Relationship to Applicant)

\_\_\_\_\_  
(Date)



**Applicants Medical Information**

Are you in good physical condition:   \_\_\_ Yes       \_\_\_ No

Do you have any physical limitations: \_\_\_ Yes       \_\_\_ No

If yes, explain your physical limitations: \_\_\_\_\_

Do you have, or have you had, any of the following conditions. If yes to any, explain in the medical comments section below.

	Yes	No
Allergies	___	___
Allergic to any medications	___	___
Mental or Emotional Problems	___	___
Alcohol or Substance Abuse	___	___
Physical Impairments	___	___
Hearing Impairment	___	___
Coronary Related Impairments	___	___
Diabetes	___	___
Convulsions or Seizures	___	___
Respiratory Distress	___	___

If there are any medical or physical concerns, please describe in the medical comments section.

If any of the above medical questions were answered yes, explain below.

Medical Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**To be completed by a certified Physician**

This is to certify that \_\_\_\_\_ is a patient of my practice, and that there are no known medical or physical concerns with my patient, that should prevent him/her from joining the Queenstown Volunteer Fire Company, Inc.

\_\_\_\_\_  
Signature of Physician

\_\_\_\_\_  
Printed Name of Physician

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

## **Please Read Carefully Before Signing**

I hereby acknowledge that all the facts presented in this application are true to the best of my knowledge, and I authorize the Queenstown Volunteer Fire Company, Inc. to conduct a full investigation of my background, and of the information I have provided. I understand that any false information presented by me, is automatic grounds for refusal, and that my application to the Queenstown Volunteer Fire Company, Inc. may be refused for any reason deemed appropriate by the members of said organization.

I will not hold any member of the Queenstown Volunteer Fire Company, Inc. responsible for any information revealed, discussed, or presented during the investigation.

I acknowledge that before being voted on to become a probationary member, I must submit to the Membership Committee the following documents:

1. A completed application packet
2. A certified copy of my Maryland (or applicable state) driving record
3. A completed beneficiary form
4. A complete Life Insurance form

I understand that any information learned during my probationary period, may be grounds to deny me becoming a full member, at the end of my probationary period.

During your membership with the Queenstown Volunteer Fire Company, Inc., property (including but not limited to: pagers, uniforms, key/key fob, etc.) is assigned to you for your use during fire department activities. Any property, unless fully purchased by you or otherwise noted at the time it is assigned to you for your use, remains the property of the Queenstown Volunteer Fire Company, Inc.

As a member, you are responsible for the care and custody of the assigned property. Any property assigned to you for your use, that is damaged, lost or stolen in the course of fire department activities, will be replaced by the Queenstown Volunteer Fire Company, Inc.

You will be responsible for the repair or replacement of any property assigned to you for your use during fire department activities, that is lost or stolen as a result of your neglect or carelessness.

I acknowledge that I have received, or I am entitled to a copy of the current company By-Laws, and that I agree to abide by them. I also agree to put forth my best efforts to advance the interests of the Queenstown Volunteer Fire Company, Inc.

I acknowledge that I have fully read, understand and agree to abide by all the information enclosed within this application packet.

Applicants Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# **This page is for Fire Department use only**

Date application packet received by applicant: \_\_\_\_\_

Date completed application packet returned to company: \_\_\_\_\_

Date of Membership Committee interview with applicant: \_\_\_\_\_

<u>Committee Members Present</u>	<u>Initial</u>	<u>Recommendation</u>	
		Yes	No
_____	_____	___	___
_____	_____	___	___
_____	_____	___	___
_____	_____	___	___
_____	_____	___	___
_____	_____	___	___
_____	_____	___	___

Date applicant introduced to the Company: \_\_\_\_\_

Recommendation of Membership Committee: \_\_\_\_\_

Date applicant voted on to serve one-year probation: \_\_\_\_\_ Accepted Rejected  
(circle one)

Date of members six-month meeting: \_\_\_\_\_

Date members probationary period was extended: \_\_\_\_\_

Date member voted on to become a full member: \_\_\_\_\_ Accepted Rejected  
(circle one)

**Background or miscellaneous notes:**

\_\_\_\_\_  
\_\_\_\_\_

