

**Application for Membership**  
**Whippany Fire Company**  
**Junior Fire Fighter**

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

Name: \_\_\_\_\_  
                    *(first)*                                    *(middle)*                                    *(last)*

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

Phone number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Birth Place: \_\_\_\_\_

Have you ever been in trouble with the police: Yes or No

If so, when and where:

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

Proposed by: \_\_\_\_\_  
*(must be a member of the Whippany Fire Company)*

Signature of Applicant: \_\_\_\_\_

**Parental Permission:**

I hereby give my son/daughter \_\_\_\_\_ permission to participate in the activities of the Whippany Fire Company/ Department as a Junior Fire Fighter. I realize that this permission includes the participation of my son/daughter in certain fire ground activities under the direction and supervision of the Chief Officers of the Whippany Fire Department.

Signature of parent/guardian: \_\_\_\_\_

**State of New Jersey County of \_\_\_\_\_**  
\_\_\_\_\_ being duly sworn, doth depose and

*Applicants Name*  
says that the above statements are true to the best of their knowledge and  
belief. Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
*Signature of Notary Public*

\_\_\_\_\_  
*Expiration Date*

**Chiefs Approval:** \_\_\_\_\_

**Presidents Approval:** \_\_\_\_\_

Revised 4/06