

Please print using Black or Blue Ink.

1) Name	Phone Number
Address	
Email Address	
1a) Do you have your parent's permission to	apply to be a Junior Firefighter? Yes No
1b) Parent/Guardian Name 1c) Address	Phone Number
Emergency Contacts	
	Phone Number
2a) Name	Phone Number
Medical Information 3) Doctor	Phone Number
3a) Hospital	Phone Number
3b) Medical Conditions	
3c) Allergies	
3d) Do you take any medication? Yes No	
3e) If Yes, list the medication and what condi	ition it is for:
Background Information (use another sheet	
	felony will prevent anyone from becoming a member of the FFD) ed, etc.? (Felonies, traffic tickets, misdemeanors, etc.) Yes No e charge(s) was/were:

Additional Information (use another sheet of 5) What interests you the most about become	of paper if more space is needed) ming involved with the Forsyth Fire Department?
6) Please list other activities, in detail, that y	you are involved in (sports, volunteer work, church, etc.):
Applicant Signature and Date Parent/Leg	gal Guardian Signature and Date
FFD Use: Fire Chief Approval	
Parental Consent	
Forsyth Fire Department. I give my consent	, has my permission to be a Forsyth Junior Firefighter with the to allow to be a Junior Firefighter nt and First Responders or the City of Forsyth responsible for any not under the direction of an Officer.
Junior Firefighter Signature and Date	Parent/Guardian Signature and Date
Contract of Understanding	
Junior Firefighters. I and my son/daughter understand basics of firefighting and to prepare to become a full m to follow all instructions from members of the FFD and my son/daughter understand that he/ she is expected citizens as they are representing the Forsyth Fire Departure and alcohol use. I and my son/daughter understa	efighter Guidelines and understand the guidelines set up to outline the purpose of the that Junior Firefighters serve as supporters of the Forsyth Fire Firefighters to learn the nember at the age of 18. I and my son/daughter understand that Junior Firefighters are I that the general standard of conduct is to act in the manner of a professional. I and to be courteous and respectful of other members (Junior and Regular) and to all rtment. I and my son/daughter understand there is a "zero tolerance" policy regarding and that by signing this Contract of Understanding we are declaring that any violation and my son/ daughter understand that any acts that violate the guidelines and that key County Sheriff's Department.
Junior Firefighter Signature and Date	Parent/Guardian Signature and Date
	have received a copy of the Forsyth Fire Department Junior viewed them prior to signing these documents.
Junior Firefighter Signature and Date	Parent/Guardian Signature and Date
FFD Use: I acknowledge that the above received a co Guidelines.	py of the Forsyth Fire Department Junior Firefighter Program
Fire Chief Signature and Date	