## WESTFIELD VOLUNTEER FIRE DEPARTMENT

## JUNIOR FIREFIGHTER APPLICATION

## PLEASE FILL IN ALL SPACES WHERE APPLICABLE

NAME:	SOCIAL SEC	URITY #
BIRTHDATE: \\	AGE:	SEX:
ADDRESS:	CITY:	STATE: ZIP:
HOME PHONE:	WORK PHONE	;
SCHOOL:	PRINCIPAL:	GRADE:
EMPLOYED BY:	WORK	HOURS:
IN CASE OF EMERGENCY PLEASE	GIVE AN EMERGENCY CO	NTACT PERSON AND PHONE NUMBER:
Name		Phone
NAME:		PHONE #
NAME:		PHONE #
MUST BE COMPLETED BY APPLICANT'S	S PARENT OR GUARDIAN	
WESTFIELD VOLUNTEER FIRE DICONSENT TO HIS / HER PROPOSEI	EPARTMENT JUNIOR FIRI D MEMBERSHIP IN THE V FER PROGRAM SPONSORI LIZE WE ARE RESPONSIBL	ED BY YOUR DEPARTMENT. SINCE OUR
SIGNED:		RELATIONSHIP
SIGNED.		DEL ATIONSHID

## WESTFIELD VOLUNTEER FIRE DEPARTMENT JUNIOR FIREFIGHTER APPLICATION

TO BE FILLED IN BY APPLICANT'S SCHOOL PRINCIPAL	
The following student,	warding sistance in ties for the not only olvement al in order to
Sincerely  Jordan Smith  Junior Firefighter Advisor  Westfield Volunteer Fire Department	
I do recommend this student for the Junior Firefighter Program.  I do not recommend this student for the Junior Firefighter Program.	
PRINCIPAL	
Comments:	