



All applicants may be subject to a background investigation. Applicant may be denied membership as determined by the Executive Board for any reason. Disclosure for denial will not be provided to the applicant. By signing this application, the applicant authorizes the **Flags and Wills of Honor Project** to conduct said investigation. This application and any information gathered will become property of the **FWHP**.

Name:	Phone:
Address:	
Email:	

Qualifying Affiliation:    Veteran: \_\_\_\_\_                      Honorably Discharged: \_\_\_\_\_

   Branch: \_\_\_\_\_                      Dates of Service: \_\_\_\_\_

   Law Enforcement: \_\_\_\_\_                      Department: \_\_\_\_\_

   Fire / EMS: \_\_\_\_\_                      Department: \_\_\_\_\_

Signature: \_\_\_\_\_                      Date: \_\_\_/\_\_\_/\_\_\_\_\_

FWHP Use Only

Background Investigation Completed: \_\_\_\_\_                      Date: \_\_\_/\_\_\_/\_\_\_\_\_

Executive Board Decision: Accept: \_\_\_\_\_                      Deny: \_\_\_\_\_                      Date: \_\_\_/\_\_\_/\_\_\_\_\_