

# Idanha-Detroit Rural Fire Protection District Fire Corps Member Application

P.O Box B - 160 Detroit Ave N - Detroit OR - 97342 (503)  
854-3494 - idanhadetroit@gmail.com



We are pleased that you are interested in joining our team! *Please either:* print out this form, and mail or turn in to our office at the above listed address, or return the filled out .PDF to the email address listed above. Feel free to contact us with any questions!

Full Legal Name (Last, First, MI):		
Mailing Address:		
City:	State:	Zip:
Home Address (If Different Than Mailing):		
City:	State:	Zip:
Cell Phone:	Home Phone:	
E-Mail Address:		
Driver's License Number & State:		

High School:	Graduated (Y/N):
College Name:	Field of Study:
College Location:	Degree/Certificate Earned:
College Name:	Field of Study:
College Location:	Degree/Certificate Earned:
College Name:	Field of Study:
College Location:	Degree/Certificate Earned:
Other/Vocational/Trade School:	

**Signature:** \_\_\_\_\_

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

*By my signature above, I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that if any of the above is found to be untruthful or misleading, my application is subject to be rejected or my membership with the district terminated.*