

**Application for Membership
Into The
Tuckertown Volunteer Fire Department**

Name of Applicant: _____

Street Address: _____

City: _____ **State:** ____ **Zip:** _____

Age: _____ **Occupation:** _____

Home Phone: _____ **Cell Phone:** _____

Email: _____

This application shall be signed and presented to the department Secretary by a member in good standing at least one drill before the monthly meeting.

Member's Name (print): _____

Member's signature: _____

Parent/ Guardian's Signature _____
(For Junior Membership)

Investigating Committee's Report:

Approved () Disapproved () If disapproved, then enter why in the above paragraph.

President's Signature: _____

Captain's Signature: _____

Date Approved/Joined: _____