

Franklin Volunteer Fire Department Inc.

**5 Tyler Drive
North Franklin, CT 06254
Established 1954**

**Application for Membership
Explorer / Cadet**

Name: _____ Date of Birth: ____/____/____
Address: _____ Home Phone: _____
Social Security Number: _____ - _____ - _____

Education

Grade School: _____ Year Graduated: _____
High School: _____ Year Graduated: _____

Licenses Held: _____

Hobbies / Activities: _____

Medical History / Disabilities / Allergies: _____

Signature of Applicant: _____

Print: _____

Signature of Parent or Legal Guardian: _____

Print: _____

I agree to not represent, post or comment on social media regarding comments or situations that may be specific to the Franklin Fire Department.

Acknowledgement of Applicant: _____

Received By: _____

Received By: _____

Received By: _____

Date of Membership: ____/____/____