

ST. TAMMANY



FIRE DISTRICT

80581 HWY 21

BUSH, LA 70431

985-886-5608

985-886-1177

OFFICE:

FAX:

www.stfd9.org

Assigned Number:

Date:

Volunteer Application

Name: _____ Social Security No.: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Address: _____ City: _____ State: _____ Zip: _____

Birth Date: _____ Age: _____ Sex: Male Female Height: _____ Weight: _____

Occupation: _____

Employer Name & Location _____ Normal Working Hours _____

Do you have any Fire Fighting experience or training? Yes No What type of experience or training?

Requirements for Membership

- Must possess a valid Louisiana driver's license that has not been revoked or suspended within the last 36 months.
- Must not have been convicted of, pleaded guilty to or entered a plea of nolo contendere to any felony charges, or to misdemeanor charges involving violence, theft, or arson.
- Must not have been convicted of, pleaded guilty to or entered a plea of nolo contendere to DUI or to misdemeanor charges involving drugs during the past five years.
- Must be able to wear and use a respirator in accordance with the Standard on Respiratory Protection, 29 CFR 1910.134.
- Must complete FD9's mentorship program before your turn out gear, license plate or radio will be released to you.
- Must keep all issued gear and equipment secure and in working order.
- Must meet minimum participation requirements
- Must meet minimum training benchmarks set by FD9

Membership is contingent upon adherence to these requirements and observance of FD9's policies & procedures.

Emergency Contact information:

Name: _____

Membership Start Date: ____/____/____

Phone: _____ Relationship _____

Membership End Date: ____/____/____

Address: _____

City: _____ State: _____ Zip: _____

Signature: _____