



St. Anthony Volunteer Fire Department

4068 E 450S; PO Box 117

St. Anthony, IN 47575

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email: stanthonyvfd@yahoo.com



APPLICATION FOR MEMBERSHIP

Last name: _____ First name: _____ Middle: _____

Physical address: _____ Mailing address: _____

City: _____ State: _____ Zip code: _____

Home phone: _____ Work phone: _____ Cell phone _____

Email: _____ SSN: _____

Are you over 18 years old? _____

Employer _____ City: _____ Work hours: _____

Can you respond to daytime runs? _____

Have you had any traffic violations in the past year? _____

Highest level of formal education: _____

Please list any training, certifications, etc. that you have completed or held that might be of benefit as a member of the Fire Department _____

Why do you want to be a member of the St. Anthony Volunteer Fire Department? _____

You will be asked to obtain a "limited criminal background check" at the Dubois County Sheriff's office in Jasper. There is no cost for this background check. Any and all information in this application and the background check are confidential and will remain at the St. Anthony Fire Station.

Signed: _____ Date: _____