



Magnolia Fire Co. Pre-Membership Form



Name: _____

Phone #: Home: _____

Date of Birth: ____/____/____

Cell: _____

Age: _____ Sex: M / F

Email: _____

Address: _____

Street

Town

State

Social Security # _____ Driver's License # _____

Position applying for:

Firefighter / Junior Firefighter / Supporting Member / Fire Police

Do you have previous experience as a firefighter? If yes, which Company/Department were you last involved with?

Provide a reference from at least one officer in your previous Company/Department.

NAME

RANK

PHONE NUMBER

Please provide the required information if you have belong or have belonged to another company or department.

-Chief from previous Company/Department:

NAME

PHONE NUMBER

-President from previous Company/Department

NAME

PHONE NUMBER

How long were you involved with your previous company for? _____



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Provide three (3) references not in the fire service:

NAME *PHONE NUMBER* *RELATION*

NAME *PHONE NUMBER* *RELATION*

NAME *PHONE NUMBER* *RELATION*

Has your driving privileges been suspended?

Yes: _____ No: _____

Reason: _____

Have you ever been convicted of a crime? Yes: _____ No: _____

Reason: _____

Best way and time to contact you:

Phone Call / Text / Email

Morning / Afternoon / Night

I hereby authorize the Magnolia Fire Company to conduct a background check into my criminal history as well as my driver's record. I also accept to take part in a drug test as a condition of my acceptance into the company. I understand that all information will be kept confidential.

Signature: _____ Date: _____

**Thank you for your interest in becoming a part of the
Magnolia Fire Company! A committee Member will contact
you to schedule your interview.**