

**APPLICATION FOR MEMBERSHIP
ARCADIA HOSE COMPANY NO. 2, INC.
Newark Fire Department, Newark, New York**

Date: _____

Name: _____

***Date Of Birth:** _____

Address: _____

Phone: _____

ARE YOU A RESIDENT OF THE VILLAGE OF NEWARK: ___ Y/N

ARE YOU A RESIDENT OF THE TOWN OF ARCADIA: ___ Y/N

Employer: _____ **Phone:** _____

Employer's Address: _____

Job Description: _____ **Normal Working Hours:** _____

This application is received without regard to applicant's race, creed, sex, religion, color, or national origin.

WHY DO YOU WANT TO BECOME A NEWARK FIRE FIGHTER AND MEMBER OF ARCADIA HOSE: _____

PREVIOUS FIRE OR FIRST AID
EXPERIENCE: _____

Name all Organizations of which you are a Member:

Extent of Training: _____

Offices Held: _____

I confirm that I am eighteen years of age, willing to abide by the rules, by laws and requirements of a new member of Arcadia Hose No 2 Inc.

I HAVE READ AND FULLY UNDERSTAND ANY ATTACHED LITERATURE PERTAINING TO MAINTAINING MY MEMBERSHIP IN ARCADIA HOSE COMPANY NO 2 INC.

I wish to be considered for membership in ARCADIA HOSE COMPANY NO 2 INC.

SIGNATURE OF APPLICANT: _____ **Dated:** _____

SIGNATURE OF MEMBER PROPOSING APPLICANT: _____

Applicant must complete and return Department Application available on-line at:

http://newarkfire.org/join_us.htm

*ONLY USED FOR SENDING Birthday cards.

_____ For Company use only _____

This application was received by: _____ Date: _____

This application was read at regular Company meeting by:

Secretary: _____

Date: _____

Investigating Committee Report: _____

Signature: _____

Date Accepted for membership: _____

Secretary Signature: _____

Fire Council:

Letter sent on: _____

Date Approved: _____

Newark Village Board:

Letter sent on: _____

Date Approved: _____

_____ For Company use only _____

GENERAL INFORMATION

A candidate for membership must be at least 18 years old and may be proposed by any member of the Company. The Company reserves the right to ask for a Certificate of Health from a qualified physician. The application for membership shall be accompanied by two dollars (\$2.00), plus dues, payable at \$1.00 per month through and including the following April. The member candidate shall be investigated by the Investigating Committee and shall be voted upon by the regular members at a regular or special meeting' of the membership, requiring a 2/3 affirmative vote of the membership present for acceptance. If the candidate member is not accepted for membership, all monies accompanying the application shall be returned to the candidate. The Newark Village Board and the Fire Council of the Newark Fire Department shall immediately be notified when a candidate has been accepted for membership.

MAINTAINING MEMBERSHIP

All new members will be on probation for one year. During this year they must attend 50% of all scheduled Newark Fire Department trainings and attend 50% of all meetings of this Company. Failure to meet these requirements will result in expulsion and forfeiture of all rights with Arcadia Hose Company No. 2 Inc. All members must pay their dues for the following year at the Annual meeting. Any member behind three months in dues shall be notified by certified letter by the secretary. If said member does not pay the dues in arrears by the next regular meeting, that member shall be dropped from the rolls of the company. Upon acceptance as a member or your request, you will receive a copy of the By-Laws of the Arcadia Hose Company No. 2 Inc. which will explain the operation of the company, duties of the officers, and members etc. Company meetings are held on the first Monday of every month at 7:30 P.M. in our meeting room or otherwise stated. Our Annual meeting is held on the first Tuesday of April at 7:30 P.M. Followed by elections and our regular Company meeting.