

Pineland Volunteer Fire Dept.

**P. O. Box 129
Pineland, Texas 75968-0129**

PERSONEL INFORMATION Junior Membership

Name:	First	Middle	Last
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Address	City	Zip Code
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Phone Number	Date of Birth	Drivers License Number
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Name, Address, & Phone Number of Emergency Contact

Name, Address, & Phone Number of Beneficiary (if different than above)

Family Physician (Name, Address, & Phone Number)

Drug Allergies or Other Medical Problems (if any)

Parent/Guardian Signature	Date
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Employers Address	Phone Number
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Applicant's Signature	Social Security Number
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Date Joining Pineland Fire Dept.	Signature of Witnessing Officer or Member
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Please, give a brief statement about yourself and your reasons for wanting to join the Pineland Fire Department. List any special skills, talents, training or prior fire service experience. Please list any and all fire department that you have been involved with and give their address or phone number, if possible.
