

**OCEAN GROVE FIRE DEPARTMENT**

Neptune Fire District No. 2  
50 Olin St., Ocean Grove NJ 07756

---

APPLICATION FOR MEMBERSHIP IN VOLUNTEER FIRE COMPANY

---

To which fire company are you applying:

- Eagle Hook & Ladder Co. No. 1
- E.H. Stokes Fire Co. No. 3
- Washington Fire Co. No. 1

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

*If at this address less than five years, please provide past addresses for the last five years.*

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Are you a U.S. Citizen     YES                       NO

Social Security No: \_\_\_\_\_

Driver License Number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Are your driving privileges currently revoked, suspended, about to be suspended, or been revoked, suspended, or restricted anywhere during the last 10 years?     Yes     No

If yes, provide pertinent details. \_\_\_\_\_

Current Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work Phone \_\_\_\_\_

Have you previously applied to any emergency service organization?     Yes     No

If yes, list below the following information:

Name of organization \_\_\_\_\_ Outcome of Application \_\_\_\_\_

Current status \_\_\_\_\_ Name of Supervisor \_\_\_\_\_

Do you hold any current certifications pertinent to emergency services? If so, list below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you served in the military?     Yes     No

If yes please indicate branch, dates of service, rank at discharge, and type of discharge.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_