

CENTRAL FIRE PROTECTION DISTRICT #4

EXPLORER POST 300 APPLICATION FORM

This application is to be filled out and returned to the Central Fire Department Station #31 on Sullivan Road just north of Hooper Road.

Name _____

Address _____ City _____ State _____

Zip Code _____ Home Phone _____

Age _____ Sex _____ Height _____ Weight _____

Social Security # _____ / _____ / _____

Present Physical Condition ___(Excellent)___(Good)___(Fair)___(Poor)

Are you currently on any medications? (If yes, list) _____

*Please attach a copy of your latest report card to this application form.

I have received and read the Rules and Regulations of the Central Fire Department Explorer Post 300 and understand them completely.

Signature _____ **Date** _____

Parent(s) _____ **Date** _____