

**APPLICATION FOR MEMBERSHIP
BRONTE VOLUNTEER FIRE DEPARTMENT**

Bronte, Texas _____ 20_____

To the President and Members of the Bronte Volunteer Fire Department and the Mayor and Bronte City council:

I _____ hereby make application for membership in Bronte VFD. I have been a resident of Coke County., Texas for the past _____ years / _____ months.

Proof of residency – utility bill in your name, leases/rental agreement with your name.

Physical address _____

Occupation is _____

Are you currently or have you been on disabled? YES NO

Date of birth is _____

Driver's License: Number _____ State _____
Expiration Date _____

I *have/never have* been on a Volunteer Fire Department.

Please list any VFD you have been a member of.

Name of VFD	City, State
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Name of VFD	City, State
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Have you been convicted of a MISDEMEANOR or FELONY, and/or placed on probation, fined or given a suspended sentence such as pretrial diversion or deferred adjudication in court? List all cases other than minor traffic violations. PLEASE NOTE: A full disclosure by you is to your advantage, as your record does not constitute an automatic bar. FAILURE TO ADMIT ANY OF THE ABOVE WILL RESULT IN DISQUALIFICATION OF YOUR APPLICATION.

(Circle one) YES NO If Yes, please provide the following:

Date: _____ Charge: _____
City/State: _____
Disposition: _____

Are you or have you ever been registered as a sex offender in Texas or any other State?

YES NO

I hereby certify that the statements made and answers given by me to the foregoing and following questions are true and correct and that there are no omissions of any kind whatsoever. I agree that any evasion, untruthful statement, answer, or omission shall be sufficient cause for discharge at any time. I agree to submit to physical examination including drug screen, whenever requested by the Bronte VFD or City of Bronte, by doctor, or doctors designated by the City, either prior to or during the course of bring a Bronte Volunteer Firefighter, subject to the requirements of ADA. I hereby release all doctors, medical personnel, and elected officials from all liability claims and damages in connections to furnishing any information to the City of Bronte.

I hereby request and authorize all persons, law enforcement agencies, or other interested parties not necessarily named in the foregoing application to furnish the City of Bronte with any information they may have regarding me, including motor vehicle records, military records, criminal records, and general reputation. This authorization release said organization(s) and individual(s) from all liability, claims, and damages in connection with furnishing of such information.

I understand that I will have the right to terminate my volunteer work with the Bronte VFD or City of Bronte at any time without notice and for any reason. I understand that the Bronte VFD or City of Bronte has the right to terminate BVFD membership according to the bi-laws. I also understand that as a condition of volunteer I will be subject to one of more of the following: driving record check, criminal history investigation, medical examination and/or a drug-alcohol screening test.

Signed: _____

Print Name _____

Date: _____

State of Texas

County of Coke

Sworn to and subscribed before me on the _____ day of _____ 2017.

Notary Public's signature