

**Town of Oswego
Volunteer
Fire Department**

Home of the Blazing Bandits

640 County Route 20
Oswego, NY 13126

Dear Prospective Member:

Thank you for the interest you've expressed in becoming a volunteer with the Town of Oswego Volunteer Fire Department. Before completing the enclosed application, every potential member is asked to read the information in this packet. This information will help you decide what kind of membership may be best for you. It will also help you decide if you can fulfill the obligations of that membership category. You should carefully review this outline to make your decision. We encourage you to contact one of the membership committee members if you have questions or would like more information about the various membership opportunities.

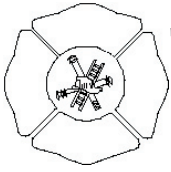
Once you have decided that being a volunteer with the Town of Oswego Volunteer Fire Department is for you, complete the application and return it to any person on the membership committee or to the address at the top of this letter. We will keep you updated about decisions regarding your potential membership. You are encouraged to attend training drills and meetings although you will not be able to actively participate or vote on issues until your membership has been approved.

Again, thank you for your interest. We look forward to considering your application for membership.

Sincerely,

The Membership Committee
Town of Oswego Volunteer Fire Department

**YOU MUST COMPLETE PAGE 2 & 3 OF THIS
APPLICATION TO BE CONSIDERED FOR MEMBERSHIP.**



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APPLICATION FOR MEMBERSHIP

Legal Name _____ Home Phone Number _____

Address _____ Cell Phone Number _____

Date of Birth _____ Age _____

I wish to be considered for the following type of membership (please circle ONE):

ACTIVE FIRE/EMS

FF w/RESTRICTIONS

ACTIVE MEDICAL ONLY

COFFEE SQUAD

CORPORATE

SOCIAL

APPOINTED

Email Address: _____

Name of person giving application _____

Have you been a member of another
fire department/ambulance corps?

NO

YES

Name of previous company/department _____

Address of previous company/department _____

Offices held _____

Are you still a member of this department? NO YES Dates _____

Have you ever been denied
membership/dismissed from any
volunteer fire company/department?

NO

YES

Name of company/department _____

Address of company/department _____

Do you have any medical or
firefighting certifications
and/or classes?

NO

YES

Please attach copies of all certifications and verification of class
completion to this application.

Also attach anything which you feel would support your application for
membership with the Town of Oswego Volunteer Fire Department.

Official Use ONLY

Date application received: _____

Date approved by line officers: _____

Date approved by membership committee: _____

Date approved by executive board: _____

Date approved by Board of Fire Commissioners: _____

Date approved by Dept. membership: _____

TOWN OF OSWEGO FIRE DISTRICT

640 County Route 20
Oswego, New York 13126

Criminal History Records Check

I, the undersigned, hereby authorize the Oswego County Sheriff's Department to release to the Town of Oswego Fire District, any Sheriff's Department records/or police records that may be associated with Sheriff's records, located in a central repository for such police/criminal history records, on file under the following name(s):

Legal Name _____

Also known as _____

Maiden name _____

Date of Birth _____ Social Security Number _____

Place of Birth _____

Address _____ from _____ to present

Previous Address _____ from _____ to _____

Height: _____ Race: _____

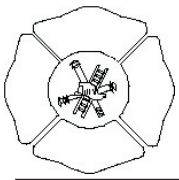
Requested by (Commissioner) _____ Date _____

It is understood that this search is of Sheriff's/associated police records and may/may not include information from other police agencies. The Authorizing Party hereby agrees to indemnify and save harmless the Oswego County Sheriff's Department, its officers and employees from and against any and all claims, demands, actions, suits and proceedings by others; against all liability to others, including but not limited to any action whatsoever, and against any loss, cost, expense and damages resulting therefrom, arising out of or involving any negligence on the part of the Authorizing Party in the execution of this criminal history records check.

Motorist I.D. Number _____

Authorizing Party's (Applicant's) Signature

Date



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Membership Classifications

The following categories or classifications of membership are available to applicants according to the Constitution and Bylaws of the Oswego Town Volunteer Fire Department. The membership committee encourages you to review the requirements and benefits of each classification before you complete the enclosed application.

ACTIVE (Fire Fighting and Emergency Medical Services Volunteers)

Requirements:

Within a calendar quarter you must:

- Attend at least four drills
- Attend at least one business meeting
- Attend at least one-third of scheduled work details
- Attend 10% of the emergency calls per quarter
- Participate in fund raising activities

Other requirements:

- Successfully complete Fire Fighting Essentials within three years
- E.M.S. members must successfully complete certified first responder course within two years
- Fire Police must successfully complete eight-hour course within one year
- Complete six month probationary period

Benefits of active membership:

- Department supported training
- Service Awards program
- Life insurance (line of duty death)
- Annual installation banquet
- Holiday party
- September family picnic
- Member Assistance Program
- Children's holiday party
- Visit by Santa
- All necessary safety equipment

**If you are a member of another department and looking to join our department you will be required to submit a letter from your home dept. This letter must state that your home department is aware of you intentions and include verification of any qualifications you have from your home department.

CORPORATE

Requirements:

- Attend one business meeting per quarter with a minimum of six business meetings per fiscal year
- Participate in fund raising activities
- Complete six month probationary period

Benefits of corporate membership:

- Annual installation banquet
- Holiday party
- September family picnic
- Member Assistance Program
- Children's holiday party
- Visit by Santa

SOCIAL

Requirements:

• There are no requirements for social members but they are encouraged to participate in department fund-raising activities when they can.

Benefits of social membership:

- Invitation to annual installation banquet

COFFEE SQUAD

Active Coffee Squad members should participate in at least one coffee squad request during a calendar year. Members are required to be 18 years of age and submit a complete application and be approved by the Fire District.