

Granbury Volunteer Fire Department Support Brigade
 Volunteer Application
 1701 W Pearl St.
 Granbury, TX 76048
 www.gvfdsupportbrigade.com



Please print clearly

(First)		(Last)		Application Date			
Female <input type="checkbox"/>	Male <input type="checkbox"/>	Birth date		Social Security Number:		DL #:	
Home Address Street				City		State	Zip Code
Family member(s) on the Granbury Volunteer Fire Department? <input type="checkbox"/> yes <input type="checkbox"/> no							
Previous Auxiliary Experience? If so where? <input type="checkbox"/> yes <input type="checkbox"/> no _____ where							
Days / Times I can volunteer:							
Sunday _____		Monday _____		Tuesday _____		Wednesday _____	
Thursday _____		Friday _____		Saturday _____		Open to being on call incase of a larger disaster? <input type="checkbox"/> yes <input type="checkbox"/> no	
Email Address							

Emergency Contact Person			
(First)		(Last)	
Home Phone Number			
Cell Number			
E-Mail Address			
Employer			
Employer Phone Number			

AUTHORIZATION FOR EMERGENCY MEDICAL ATTENTION:		
In the event I need medical attention, I authorize the person in charge to take me to:		
Name of Physician:	Address:	Ph.#:
Name of Emergency Medical Care Facility:	Address:	Ph.#:

I give consent for someone in charge with the Granbury Volunteer Fire Department Support Brigade to secure all necessary emergency medical care for my self in the event I am injured while volunteering.

I give consent for myself to be transported in case of emergency.

Yes No

Volunteer Signature

Date

MEDICAL HISTORY

1. Any known allergies?

2. Dietary restrictions?

3. Do you have any special conditions or needs that the brigade should be made aware of for the safety of yourself or others?

SPECIAL ACTIVITIES PERMISSION

I hereby give **or** do not give my consent:

For myself to be photographed and used for GVFD Support Brigade purposes (online, print, and all media sources) Yes No

For my name, phone number, and email address to be included in the Brigade Directory. Yes No

VOLUNTEER PROCEDURES

1. Fill out application
2. Copy of photo ID or driver's license
3. Cleared background check through the Granbury Volunteer Fire Department
4. Review and sign the Granbury Volunteer Fire Department Support Brigade Code of Conduct Form
5. Review and sign the Granbury Volunteer Fire Department Support Brigade meeting and attendance requirements

I acknowledge I have read through this entire application, the code of conduct form, and the meeting & attendance requirements. I have been able to ask any questions regarding any of these forms.

Volunteer Signature

Date