



Date _____

I hereby make application for Probationary Membership in the Oxford Fire Company.

Full Name _____

Mailing Address _____

Residing Address _____

How long at this address _____ Date of Birth _____ Gender *M or F*

Home Phone _____ Work Phone _____ Cell Phone _____

Social Security Number _____ - _____ - _____ Height _____ Weight _____

Physical Condition (list any infirmities) _____

Occupation _____

Name Employer _____

How long employed by above _____ Employer Phone# _____

What hours do you work _____

Do you have a valid Drivers License? *yes or no* License # _____ State _____

Have you incurred any moving violations in the last three years? *yes or no* Explain _____

Have you been convicted of any law violations other than motor vehicle? *yes or no* Explain _____

Are you willing to take a physical exam if asked to do so? _____

References (at least one) _____

Type of Membership desired: Active Fire _____ Active Associate _____

Active Medical _____ Active Unassigned _____

Applicant's Signature _____ Date _____

Sponsor's Signature _____ Date _____

Dues \$1.00 Initiation Fee \$0.50