

LONDONDERRY TOWNSHIP SPECIAL FIRE POLICE
PO BOX 324 MIDDLETOWN, PA. 17057

Name: _____

Address: _____

Phone Numbers _____

Social Security No.: _____

Occupation: _____

Employers Name: _____

Employers Address: _____

Have you ever applied for membership in other Special Fire Police organizations: _____

If yes: Name of other Special Fire Police _____

Area of interest in Londonderry Township Special Fire Police: _____

Do you have a criminal record? _____

(Note: All potential members will have a background check performed prior to acceptance in Londonderry Township Special Fire Company. A failure to note record will be justification for denial of membership.)

Recommended by: _____

Recommended by: _____

Religion and Church (Optional information for Chaplain's records. Can be supplied, if desired, after approval after application.)

Beneficiary Name (For insurance policy) _____

Date Application submitted: _____