

HARRIMAN ENGINE CO. NO. 1

2 S. MAIN STREET - P.O. Box 26
HARRIMAN, NY 10926
845-783-1120

WWW.HARRIMANFD.ORG

MINOR MEMBERSHIP PERMISSION BY PARENT or GUARDIAN

NAME OF APPLICANT: _____

NAME OF PARENT or GUARDIAN: _____

I hereby give my permission for my son/daughter to join the Harriman Engine Company#1. I understand and give my permission to the following:

1) Criminal and Arson background check.

2) Medical Examine to include:

A) Pulmonary Function Test

B) Blood Work

C) Chest X-Ray

3) Vaccines as Appropriate to the FIRE SERVICE (initial next to each and circle yes or no)

A) HEPATITIS B : _____ YES NO

B) HEPATITIS A : _____ YES NO

C) LYME : _____ YES NO

D) TETANUS : _____ YES NO

4) All minor members must leave the Firehouse by 9:30 PM unless you so give your son/daughter permission to stay later. All minor members are required to leave the fire station and premises by 10:00 PM. YES NO SET TIME: _____

PARENT or GUARDIAN SIGNATURE: _____ DATE: _____

A COPY OF THE PARENT OR GUARDIAN'S LICENCE WILL NEED TO BE ATTACHED