



Social Membership Application

CRITTENDEN VOLUNTEER FIRE DEPARTMENT

Organized 1931

13415 Genesee Street

Crittenden, NY 14038

"I hereby make application to the Crittenden Volunteer Fire Department, Inc. for social membership and agree to be governed by the By-Laws of the Company and S.O.G."

NAME _____

PRESENT RESIDENCE _____

PHONE NUMBER _____ HOW LONG AT RESIDENCE _____

DATE OF BIRTH _____ (Optional)

IS APPLICATION FEE OF FIVE DOLLARS (\$5.00) ENCLOSED? _____

I affirm that the statements on this application form are true.

Signature of Applicant

Date

Please mail to: Crittenden Volunteer Fire Department

P.O. Box 120

Crittenden, NY 14038

OR drop off your application to 13415 Genesee Street

President

Vice President

Member