Connecticut Fire Police

https://www.ctfirepolice.org/

Membership Application

Applicant Information

Please Print

Full Name: _____ Date _____

Last *First* *M.I.*

Address: _____

Street Address *Apartment/Unit #*

_____

City *State* *ZIP Code*

Phone: _____ Email _____

Are your Dues Current? Yes No (Circle One)

Dues Paid Fiscal Year 24/25 25/26 (Circle Fiscal Year Period)

Amount Paid _____ ☐ cash ☐ check# _____

Your Department's Name: _____
(Fire Dept.)

Are you a Fire Police Officer Only? YES ☐ NO ☐

Are you on a **Paid/Career** Department YES ☐ NO ☐

Are you also Firefighter? YES ☐ NO ☐ If yes, where _____

Are you on a **Volunteer** Department? YES ☑ NO ☐

Rank/Certifications: _____

CPR Certified ■ YES ☐ NO EXPIRES 3/26

If yes, where? _____

Criminal History/Disclaimer

Have you ever been convicted of a felony? ☐ YES ■ NO If yes, please explain on the back or attach a separate piece of paper. I certify that my answers are true and complete to the best of my knowledge and by signing this application below, I am agreeing to a background and Character Check by the CFPA if needed.

Emergency Contacts

Who would you like us to contact in the event of an emergency? (If you were to become ill at a meeting or deployment)

Name: _____ Phone: _____ Relationship: wife

Signature

Members Signature: Date:

_____

For Official Use Only

Date Application was received _____ Check# _____ Dues Paid To: _____

Active _____ Associate _____ Life Member _____ Date _____ Recv'd by: _____