

BRIGHTON FIRE DEPARTMENT

KINNEY BRIDGES, CHIEF CHAD GATLIN, ASSISTANT CHIEF
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APPLICATION FOR VOLUNTEER FIREFIGHTER

Name: _____

Address: _____

Phone: Home _____ Work _____ Cell _____

Current Employer: _____

Phone: _____

D.O.B.: _____ S.S.# _____ Age: _____

Have you ever been convicted of a crime other than a minor traffic offense? _____

If yes, please explain:

Driver's License: # _____ Class _____ Endorsements _____

Please list any applicable certifications below:

I hereby certify that all of the above is true, to the best of my knowledge. I authorize the Brighton Fire Department to perform a background check, which I understand is necessary for consideration of membership to this organization. I understand that in no way is this application a contract for membership and, if I am given membership that it can be terminated at any time without notice.

Signed (Applicant) _____

Date _____