

RUTHERFORD



FIRE DEPARTMENT

MEMBERSHIP PACKET

IMPORTANT:

Application Fee: \$27 Non-Refundable

MEMBERSHIP COMMITTEE MEETING

MEETS EVERY **THIRD MONDAY** OF THE MONTH FOR INTERVIEWS
OF NEW MEMBERS

7:00 PM TO 8:00 PM

Duties of the Membership Committee:

Members of the membership committee are to be doing interviews and calling references for all new applicants to the department. If an application is received by the 10th of the month, the member's application should be ready for interview on the third Monday of the current month. Any applications received after the 10th of the month, interviews may be held the following month.

Members on the Membership Committee:
Chairman: Lt. Jon Parsons, Board: FF/DR Chad Davis

Rutherford Volunteer Fire Department, INC.

District – 11

Application for Membership

810 Old Salem Road
Murfreesboro, TN 37129
(615)-907-4086

WWW.RUTHERFORDVOLUNTEERFIREDPARTMENT.ORG

Membership Classification Applied For: _____ Fire Fighter _____ Auxiliary _____ Fire Explorer

Applicant Information

Name: _____ Date of Birth: _____ Sex: M F
Street Address: _____ City: _____ State: _____ Zip: _____
Home Phone: () _____ Cell Phone: () _____
Email: _____

Drivers License Number: _____ State: _____ Social Security Number: _____

Member must have a valid Tennessee Drivers License to operate department owned vehicles.

Emergency Notification

In case of emergency, notify: _____ Relationship: _____
Address: _____
Phone: () _____

Job Information

Occupation: _____ Years Experience: _____ Phone: () _____
Employer: _____ Supervisor: _____
Street Address: _____
City: _____ State: _____ Zip: _____

Must be employed or in School

Educational Experience

Do you have either a high school diploma or G.E.D.? (Circle one) Yes or No
University or College Degree(s)? (Circle highest attained) Associates, Bachelors, Master, or Doctorate
Field of Degree(s) University or College attended:
Years of University or College attended if no degree conferred:
Must have at least either a high school diploma or G.E.D.

Emergency Services Experiences

Are you a certified firefighter in Tennessee? _____ Another State _____ Where: _____
Level of Certification: _____

Do you hold licenses or certifications in any of the following? CPR: _____ 1st Responder: _____ EMT: _____
EMT-IV: _____ Paramedic: _____ Vehicle Extrication: _____ EVOC: _____ What State: _____

Any Other: _____

Turn in copies of all licenses or certifications that are current and valid.

Past Emergency Services Agency Affiliations

Agency: _____ Address: _____ Phone: _____

Check: Fire Emergency Medical Rescue Police

Agency: _____ Address: _____ Phone: _____

Check: Fire Emergency Medical Rescue Police

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Check: Fire Emergency Medical Rescue Police

Availability

Personnel work schedules are an important consideration when determining appropriate staffing levels to respond to calls for services. There are hours of the day, and days of the week, that naturally have lower staffing levels because of volunteer staffing. Please provide the following information so that we can plan appropriately.

Are you available to respond during daytime hours? (Circle one) Yes No

Do you work shift work? (Circle one) Yes No If so what shift? _____

Can you respond from work? (Circle one) Yes No

Note: The Rutherford Volunteer Fire Department does not advocate endangering a member's position at work to respond to fire department calls for service.

Interests / Skills

There are many operations and personal skills that make an organization successful. Once you are accepted into the Rutherford Volunteer Fire Department and have received recruit training, there are areas in which some of your skills and talents may be used. Listed below are some of those activities. Check any that you may be interested in.

Apparatus Maintenance Equipment Maintenance Public Education Fire Investigation

Photography Finances Training Record Keeping Administration Pre-planning

Station work Computer Website Other Explain: _____

Reference Information

Please provide the names of individuals, other than relatives, who have known you at least one (1) year whom that Department's Membership Committee can contact as part of its background investigation.

Social Acquaintances: (Personal References)

Name

Phone Number

Years Known

1.

2.

3.

The Rutherford Volunteer Fire Department is an Equal Opportunity Employer, and does not discriminate due to race, sex, color, national origin, age, disability or religion in regards to its hiring, promotional, or duty assignment practices. By signing this application, you are being offered membership in the Department and you understand that the Membership Committee will conduct a background check, including a criminal and references background check before accepted. Acceptance or Denial of membership, into the Department is by

Membership Committee vote. Also by signing this application, you certify that all information giving is turn and correct to the best of my knowledge and belief. I also further certify that I have never been convicted of a felony in any state. I understand that any false statement my result in my immediate dismissal from the Department. I HEREBY MAKE APPLICATION FOR MEMBERSHIP IN RUTHERFORD VOLUNTEER FIRE DEPARTMENT INC.

Applicant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE ---FOR DEPARTMENT USE ONLY

Date Received: _____ Interview Date: _____
Approved: _____ Disapproved: _____ Date: _____
Six-Month Probationary Period Completion Date: _____
Membership Chairman: Print _____ Sign: _____ Date: _____

RUTHERFORD VOLUNTEER FIRE DEPARTMENT, INC.

FIREFIGHTER MEMBERSHIP CONTRACT

I DO HEREBY VOLUNTEER entirely upon my own initiative, risk, and responsibility to join the Rutherford Volunteer Fire Department and with full knowledge that such activity may consist of:

1. Interior and exterior fire attacks involving structures, wildland, vehicles, or other fuels;
2. Carrying and setting ladders;
3. Ascending and descending ladders;
4. Wearing full protective clothing and self-contained breathing apparatus for extended periods of time;
5. Participating in any other activities as may be necessary to carry out the Department fire suppression mission;
6. And attain the competencies specified for Fire Fighter I and II by most current edition of NFPA 1001.

I AGREE to observe and comply with all laws, ordinances, policies, rules, regulations and standard operating procedures of this department that are provided in writing.

I AGREE THAT I shall establish and maintain a working knowledge of all applicable state laws and all written department rules and regulations. In the event of improper action or breach of discipline, it will be presumed that I was familiar with the written policy, rules, regulation, or order in question. I understand that the violation of any written policy, rule, or regulation may be grounds for disciplinary action by department officers, Membership Committee, or Board of Directors.

I AGREE TO perform my duties as required or directed by law, department rule, policy, order, or by order of a higher officer of fire fighter. I also agree to perform all lawful duties required by a competent authority promptly as directed, notwithstanding the general assignment of duties and responsibilities.

FOR IN CONSIDERATION OF benefits of the instruction, equipment, facilities, and other training and necessities I will receive from the Rutherford Volunteer Fire Department, Rutherford County, the state of Tennessee, or any other agency actively participating in fire suppression or other emergency operations and training, I do hereby for myself, my heirs, executors, and administrators remise, release, and forever discharge the Rutherford Volunteer Fire department; the Rutherford County government; the State of Tennessee; all officers, directors, employees, and agent, acting officially or otherwise, of the Rutherford Volunteer Fire department; the Rutherford County government; the State of Tennessee, from any and all claims, demands, actions, or causes of action on account of my death or on account of any injury to me which may occur by reason of my participation in fire suppression or other emergency operations and training.

I AGREE TO reimburse the Rutherford Volunteer Fire department; the Rutherford County government; the State of Tennessee; all officers, directors, employees, and agent, acting officially or otherwise, for any and all legal expenses incurred by them as a result of any legal action taken as a result of my participation in fire suppression or other emergency operations and training.

I UNDERSTAND THAT this agreement in no way precludes Department members from filing claims against whatever insurance coverage the Department may have in force.

I UNDERSTAND THAT I will summarily dismissed from the department, in accordance with procedures established in the Department by-laws, for any of the following if committed while on duty with the Department:

1. Illegal possession of any controlled substance;
2. Driving while under the influence of alcohol or drugs;
3. Unauthorized possession of any deadly weapon;
4. Theft;
5. Physical assault on any person
6. Intentional violation of safety standards;
7. Disobedience or intentional failure or refusal to follow any lawful order of a superior;
8. Psychological inability to participate;
9. Deliberate disruptive behavior; or
10. Lack of participation in required training activities.

I UNDERSTAND THAT a felony conviction on any offense, whether or on duty, shall result in immediate dismissal.

I AGREE THAT:

1. I will participate in all Department operations to the best of my ability;
2. I will follow the lawful orders of all officers, instructors, or crew leaders during my tenure in the Department.
3. I will abide by all Department by-law, rules, policies, and procedures.
4. I will participate in a minimum of 60 hours of formal training each year and to attend a minimum of 50% of all meeting.
5. I will attain certification as a Fire Fighter I through the Tennessee Commission on Fire Fighting within one year of my acceptance as regular member of the department.

I KNOW OF NO physical, mental, or medical conditions that I have that may be detrimental to myself, other members, the public, or Fire Department equipment. I further know of no physical, mental, or medical conditions that I have that may prevent my participation in any of the above named activities.

I AGREE THAT if I provide my own personal protective equipment:

1. I shall be responsible for its adequacy, including proper maintenance, and sanitation of such equipment and compliance with applicable OSHA and NFPA standards and do so assure the Rutherford Volunteer Fire Department;
2. Any Officer of Rutherford Volunteer Fire Department shall be authorized to inspect my personally owned personal protective equipment to assure its adequacy, including proper maintenance, and sanitation of such equipment on demand;
3. Rutherford Volunteer Fire Department assumes no responsibility for any damages incurred to my personally owned personal protective equipment as a result of its use on any fire department activity including fire calls and training;
4. I will assume full responsibility for the repair or replacement my personally owned personal protective equipment at no expense to the fire department;
5. I will immediately discontinue use of all personally owned personal protective equipment if, in the judgment of any fire department officer, it is inadequate for its intended use;
6. The fire department may, at the discretion of the fire chief, repair, refurbish, or replace any of my personally owned personal protective equipment damaged through use on any fire department activity, however, his decision it's final and the fire department assumes no obligation to do so.

I AGRSS THAT if I am provided personal protective equipment by Rutherford Volunteer Fire Department:

1. I shall be responsible to the Rutherford Volunteer Fire Department for proper maintenance, and sanitation of such equipment and compliance with applicable OSHA and NFPA standards;
2. Any officer of Rutherford Volunteer Fire Department shall be authorized to inspect any department owned personal protective equipment to assure its adequacy, including proper maintenance, and sanitation of such equipment, on demand;
3. I shall assume full responsibility for any loss or damage incurred to department owned personal protective equipment, other than normal wear and tear, as a result of my negligence or failure to properly maintain and sanitize such equipment;
4. I agree to reimburse the Rutherford Volunteer Fire Department for the full replacement cost of any department owned personal protective equipment in accordance with the replacement cost established and posted or full cost of any repairs to department owned personal protective equipment, other than normal wear and tear, as a result of my negligence of failure to properly maintain and sanitize such equipment;
5. I will immediately discontinue use of any or all department owned personal protective equipment if, in my judgment, it is either unsafe or inadequate for its intended use;
6. I will immediately notify my chain of command of any loss or damage to any department owned personal protective equipment in my possession that renders it unsafe for continued use.

I AGREE THAT if I should become aware of any violation of any law, policy, or regulation of the department, or anyone who disobeys orders, I shall immediately report such conduct to his or her immediate supervisor. Should the violator be the immediate supervisor, then I shall notify the next higher ranking in the chain of command.

I AGREE THAT I will remove myself from the Department any time that I become unwilling to abide by the terms of this contract. I understand that a consistent pattern of violations of the terms of this contract indicates my unwillingness to abide by its terms and may be considered to be sufficient cause for my release from the Department. I understand that I may be released from the Department any time for any reason while on probationary status by order of my Battalion or any Chief Officer.

I AGREE THAT the acceptance of my membership in the Rutherford Volunteer Fire Department is contingent upon my acceptance to the terms and conditions of this contract.

MEMBER **PRINT** NAME: _____

MEMBER **SIGN** NAME: _____ DATE _____

ENTERED INTO THIS _____ DAY OF _____, _____.

FIRE CHIEF _____ DATE _____

DEPUTY FIRE CHIEF _____ DATE _____