JUNIOR FIREFIGHTER PROGRAM
APPLICATION

Operating Guidelines

For Dartmouth Fire District 2
Junior Firefighter Training Program

- Junior members must be at least 15 years of age to join and can participate until 18 years of age.
- Junior members should maintain at least a “C” average in their middle or high school coursework, and produce documentation of the same at the time they sign up. Our department monitors this on a quarterly basis and documentation must be provided each time. If parents ask to limit participation at higher averages, their word will always be the last in these cases. In the event a junior member has lower than a “C” average, he or she will be placed on probation until the grade returns to a “C”.
- Junior members under 18 years of age must always obtain full permission from the parent or legal guardian to participate in our programs.
- Junior members will receive classroom training in core areas of interest with classes focused on CPR, communications, general fire, rescue and EMS education, and fire safety and prevention.
- Junior members will participate in hands-on training working with fire hoses, extrication tools, axes, ladders, air packs, etc.
- Junior members may participate in the following activities:

  - Parades or Special Events
  - Fundraising Events
  - Full Training
  - General Standby
  - All Department Emergency Calls
  - Fire Safety / Prevention Education and Activities
  - Meetings

- Junior members should attend regular weekly training on Wednesday nights from 7 PM till we finish which is usually around 9 PM . These may include basic training coursework, a fixed activity such as one of those listed above, or other activity with the department.
- Junior members may be working at fireground operations, such as providing refreshments to the first responders, overhauling of fire damaged structures, rolling and packing hose lines, cleaning of equipment, etc.
- Junior members may be required to ride in the responding fire apparatus.

Dartmouth District 2 Junior Firefighter Program Application

Please Print using Black or Blue Ink.

1) Name _____ Phone Number _____
1a) Address _____ Birthdate _____
1b) Email Address _____

2) Do you have your parents' permission to apply to be a Junior Firefighter? Yes No

3)Parent/Guardian Name _____ Phone Number _____
3a) Address _____

Emergency Contacts

4) Name _____ Phone Number _____
4a) Name _____ Phone Number _____

Medical Information

5) Doctor _____ Phone Number _____
5a) Hospital _____ Phone Number _____
5b) Medical Conditions _____
5c) Allergies _____
5d) Do you take any medication? **Yes No**
5e) If Yes, list the medication and what condition it is for: _____
_____
_____

Background Information **(use another sheet of paper if more space needed)**

6) Have you ever been arrested, ticketed, fined, etc? (Felonies, Traffic Tickets, Misdemeanors, etc)
Yes No
a) If yes, please list the date(s) and what the charge(s) were/was:

_____ _____
_____ _____
_____ _____

Additional Information **(use another sheet of paper if more space needed)**

7) What interests you the most about becoming involved with the Junior Firefighter Program?
_____
_____
_____

8) Please list other activities, in detail, that you are involved in (Sports, Volunteer Work, Church, etc):
_____
_____
_____

_____ _____
Applicant Signature and Date Parent Signature and Date

DFD 2 Use:

Fire Chief Approval _____ _____
Signature Date

Parental Consent

My son/daughter, _____, has my permission to be a Junior Firefighter with the Dartmouth Fire District 2 Junior Firefighter Program. I give my consent to allow _____ to be a Junior Firefighter and do not hold the Fire Department and First Responders responsible for any actions caused by my son/daughter that is not under the direction of an Officer.

_____ _____

Junior Firefighter Signature and Date Parent/Guardian Signature and Date

Contract of Understanding

I and my son/daughter have read ALL of the Junior Firefighter Guidelines and understand the guidelines set up to outline the purpose of the Junior Firefighters. I and my son/daughter understand that Junior Firefighters serve as supporters of the Dartmouth District 2 Firefighters to learn the basics of Firefighting and to prepare to become a full member at the age of 18. I and my son/daughter understand that Junior Firefighters are to follow all instructions from members of DFD 2 and that the general standard of conduct is to act in the manner of a professional. I and my son/daughter understand that he/she is expected to be courteous and respectful of other members (Junior and Regular) and to all citizens as they are representing Dartmouth Fire District 2. I and my son/daughter understand there is a "zero tolerance" policy regarding drug and alcohol use. I and my son/daughter understand that by signing this Contract of Understanding we are declaring that any violation of the guidelines is grounds for immediate dismissal. I and my son/daughter understand that any acts that violate the guidelines and that are illegal by state law will be referred to the Dartmouth Police Department.

_____ _____

Junior Firefighter Signature and Date Parent/Guardian Signature and Date

Acknowledge Receipt of Guidelines

I acknowledge that I and my son/daughter have received a copy of the Dartmouth Fire District 2 Junior Firefighter Program Guidelines and have reviewed them prior to signing these documents.

_____ _____

Junior Firefighter Signature and Date Parent/Guardian Signature and Date

I acknowledge that the above received a copy of Dartmouth Fire District 2 Junior Firefighter Program Guidelines.

_____ _____

Fire Chief Signature Date

LIABILITY RELEASE AND MEDICAL AUTHORIZATION

As parent or guardian of the child named below, I give my permission for my child (age 15-18) to participate in the Dartmouth Fire District 2 Junior Firefighter Program. I give permission for representatives of the department to provide transportation to my child for emergency reasons. In the event of an emergency, I authorize the administration of basic first aid. I also authorize appropriate treatment by emergency medical personnel.

I understand that the program will include the risk of hands-on training with careful, trained supervision; however, unexpected events may occur. I have determined that my child is fully medically capable of participating in the program activities.

I understand that photographs and video may or may not be taken of my child during these activities. I give my permission for the Dartmouth Fire District 2 Junior Program to use photographs or video for promotional purposes, including brochures or promotional video, social media, and training purposes.

I have read this release; I understand it; and I fully agree to all its terms.

Signature of parent/guardian: _____Date: _____

Name of parent or guardian (print): _____

Parent or guardian address (if different from child): _____

City: _____State/ZIP: _____

Junior's Name (print): _____ Age: _____

Address: _____

City: _____ State/ZIP: _____

Junior's signature if 18: _____