

STAFFORD VOLUNTEER RESCUE SQUAD INC.



2147 Jefferson Davis Hwy  
Stafford, VA 22554

Telephone Number  
(540) 659-5495

\*\*\*\*\* MEMBERSHIP APPLICATION FORM \*\*\*\*\*

DATE: \_\_\_\_\_

INSTRUCTIONS

1. Please type or legibly print all information.
2. Answer all questions in full, applications must be 100% completed when submitted.
3. Attach a copy of all certifications.
4. Please attach a certified copy of your driving record, dated within 30 days of application date, from the State of Virginia and/or any other State where you have had an operators license during the past five years.
5. A recent photo is requested, but not required.
6. All applications will be considered without regard to race, religion, sex, age, national origin, citizenship or marital status.

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☐ I understand I must attend and complete an orientation program (given the  
(Initial) 2<sup>nd</sup> Saturday of each month) within 60 days of becoming a member. This  
orientation must be completed prior to running a duty (does not apply to 'ride-  
alongs').

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TYPE OF APPLICATION: (Initial the box that applies to you)

☐ **Active membership** - I must attend a minimum of four scheduled day and/or night duty assignments per month, two training sessions each quarter, two business meetings per quarter and adhere to the constitution, bylaws and SOP's pertaining to my membership status in order to remain active.

☐ **Associate Membership** - I must attend a majority of business meetings each year, perform a minimum of 20 hours volunteer work each month for the squad as determined by the president, and adhere to the constitution, bylaws and SOP's pertaining to my membership status in order to remain active.