



Lake Wenatchee Fire and Rescue
21696 Lake Wenatchee Hwy
Leavenworth, WA 98826
Phone 509.763.3034 Fax 509.763.8800
lwfr@nwi.net

Name \_\_\_\_\_ Date \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Permanent Resident? \_\_\_\_\_ (Yes/No) If No, Are You Present in the Area At Least Once a Month or More? \_\_\_\_\_

Will You Be Able to Attend Training Sessions Regularly? \_\_\_\_\_ (Yes/No)

Please List Any Previous Firefighter Experience/Training You Have: \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

Please List 2 Personal References and 2 Professional References:
\_\_\_\_\_
\_\_\_\_\_

Why Do You Want to Join This Fire Department? \_\_\_\_\_
\_\_\_\_\_
\_\_\_\_\_

\*\*\*\*\*READ THE FOLLOWING CAREFULLY\*\*\*\*\*

To ensure that you are not placed in a position which may be a hazard to you or others, a physical exam will be required before your acceptance as a volunteer firefighter with Lake Wenatchee Fire & Rescue.

I hereby certify that this application contains no misrepresentations or falsifications and that the information given is true and complete to the best of my knowledge and belief. I understand that there is no compensation and that I will serve as an unpaid volunteer.

\_\_\_\_\_

(SIGNATURE)

(DATE)