



GOSHEN FIRE COMPANY

1320 Park Avenue • West Chester, Pennsylvania 19380

Membership Application Process

Dear Applicant,

Thank you for your interest in the Goshen Fire Company. This letter will inform you about the department and the process for becoming a member. The attached forms should be printed and completed in order to start the application process.

The Goshen Fire Company is a combination department providing Fire, EMS, and Fire Police services to portions of East Goshen, West Goshen, Westtown and Willistown Townships.

Application Process:

To Submit Your Application

- The Membership Application must be completed by the prospective member if applicant is over the age of 18. Any applicants between the ages of 16-17 should fill out the Membership Application along with your parent or guardian.

- The completed membership application and your initial dues of \$5.00 should be:

- Dropped off at Station 54 on Park Avenue, or
- Emailed to admin@goshenfireco.org, or
- Mailed to:

Goshen Fire Company
Attn: Administrator
1320 Park Avenue
West Chester, PA 19380

- Upon receipt of your completed application and initial dues (\$5.00),

- our membership committee will review the application
- We are required by law to have the following clearances for all active members:
 - PA Child Abuse Clearance
 - PATCH (Pennsylvania Access to Criminal History)
 - FBI Background check **for any applicant that has not continually lived in PA for the past 10 years**
- These are free for volunteers and need to be initiated by the individuals. The information for obtaining the clearances will be forwarded after we receive your application.



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- After a successful background and reference check, the Membership Committee Administrator will then:
 - Report their findings with a recommendation to the Board of Directors for their approval.
 - Notify you of the outcome.
- Applicants for Fire and EMS are encouraged to attend Monday night training which starts at 7:00 pm.
- Applicants with previous Fire, EMS, and Fire Police experience should make copies of all applicable certifications that you have received. This includes, but is not limited to, CPR, First Aid-First Responder-EMT, Fire courses and NIMS classes.
- After being accepted as a member of Goshen Fire Company, you will receive additional information which includes the Standard Operating Procedures for the division in which you will participate and insurance coverage.

Further questions about the application process should be directed to the committee:

Membership Committee Administrator- admin@goshenfireco.org

Thank you,

The Goshen Fire Company Membership Committee



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Membership Application

Station 54
1320 Park Ave
West Chester, PA 19380

Station 56
1299 Boot Road
West Chester, PA 19380

Personal Information

Last Name: _____

First Name: _____

Middle Name: _____

Date of Birth: _____

Address: _____

Apt # _____

City: _____

State: _____

Zip: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Driver's License Number: _____ State _____ Expiration Date: _____

Have you been a PA resident for more than 10 years? Yes ☐ NO ☐

Have you ever been convicted of a misdemeanor or a felony? Yes ☐ No ☐

If yes, provide details: _____



Occupation Information

Occupation: _____

Employer - Company: _____

Employer Contact Name: _____ Phone Number: _____

Employer Address: _____

Position Information

Please check all
applicable

FIRE: _____

EMS: _____

Fire Police: _____

Social: _____

Previous Fire/EMS/Fire Police Service Experience

Department Name: _____

Address: _____

Contact: _____ Phone Number: _____

Have you ever been terminated or suspended as a member or employee of fire, ems or fire police organizations?

Yes ☐ or No ☐

If yes, provide details: _____

Note: Any information in this application that is found to be false is grounds for immediate dismissal from the Goshen Fire Company. All statements are subject to investigation.



References:

Please Provide Three References (Name, Address, Phone Number)

1. _____

2. _____

3. _____

Signature and Dues:

Dues are \$5.00 per year and 1st year dues must accompany this application.

Checks should be made payable to *Goshen Fire Company*

I certify that all of the statements made on this application are true, complete, and correct to the best of my knowledge and belief.

Signature: _____ Date: _____
Applicant

Signature: _____ Date: _____
Parent or Guardian Signature if applicant is under the age of 18



Office use only below

Date Posted: _____

Accepted

☐

or Rejected

☐

By Board of Directors: _____

Recommendation of Investigating Committee

Accepted

☐

or Rejected

☐

(Note: If rejected, state reasons under "comments")

Comments: