



Westminster Fire Engine & Hose Co., No. 1

"Volunteering Today for Your Tomorrow"

P.O. Box 357 • 28 John Street • Westminster, MD 21158
(410) 848-1800 Ext. 370 • wvfd3rr@westminstervfd.org

Purpose:

The Citizen's Fire Academy (CFA) provides an opportunity for citizens to learn firsthand about fire department operations. Through a series of lectures and simulated activities, citizens are provided training, similar to an actual firefighter/emergency medical provider. The Academy is of benefit to the community and the department because it builds relationships and creates a cadre of citizens who are better informed about the reality of the Fire Department.

Format:

The academy will be held on Saturday August 5, 2023 and runs from 8:00am until 5:00pm. A light breakfast and lunch will be provided.

Location: 28 John Street, Westminster, MD 21157

Instruction:

Instruction is provided by Fire Department personnel. This program is not an accredited certification course to become a certified firefighter or emergency medical technician.

Academy Curriculum:

- Overview of Fire Department Operations and Organization
- CPR-AED-First Aid Training
- Fire Extinguisher Training
- Fire Station and Fire Apparatus Tours
- Operating hose lines
- Climbing ladders

Qualifications for Participation:

- Must be a minimum of 18 years of age
- Must be a resident or business owner in Carroll County

Application Process

Return completed applications to:
Westminster Fire Department
Attention: Recruitment & Retention Coordinator
P.O. Box 357
28 John Street
Westminster, MD 21158

OR

email to: wvfd3rr@westminstervfd.org

Last Name: _____ First Name: _____ Middle Initial: _____

Social Security Number: _____ Date of Birth: _____ Sex: M _ F

Street Address: _____

City, State and Zip: _____

Home Phone: (_) _____ Cell Phone: (_) _____

Email Address: _____

Have you ever been convicted of a Felony? Y ____ N ____ Misdemeanor? Y ____ N ____

If yes, please explain: _____

Are you aware of any medical conditions which would prevent you from safely performing Academy activities?

List any training you have received in the medical or fire service including classes of first aid, CPR, etc. (Note: No training is required for acceptance into the Academy)

Please list two emergency contacts:

1) Name: _____ Phone: _____

2) Name: _____ Phone: _____

Please explain briefly why you wish to become enrolled in the Westminster Fire Department Citizen's Fire Academy.

How did you hear about the Westminster Fire Department Citizen's Fire Academy?

ACKNOWLEDGMENT:

I certify that the foregoing answers and all supplemental documents are true and correct to the best of my knowledge and that I have not knowingly withheld or misrepresented any material fact herein. Any false information may result in the immediate rejection of this application or shall be grounds for immediate dismissal from the program.

_____ / ____ / ____
Signature of Applicant Date

Memorandum of Understanding

Please read this entire document before signing. This document releases the Westminster Fire Department their staff, employees, volunteers, or agents from any liability from your participation in the above-described activity.

Westminster Fire Department will make every effort to provide a safe and enjoyable experience. We cannot guarantee that no injuries or damages will occur through participation in our program. We therefore require each participant to read and sign the following form before participating.

I, _____, (print full name), hereby request to participate in the Westminster Fire Department Citizen’s Fire Academy program.

Furthermore, I fully understand that participation in the activities of said program is purely voluntary and that the activities of said program may involve risks and hazards of bodily injury or property damage sustained through participation in the activities of said program.

I further state that I am in proper physical condition to participate in this activity. In addition, I fully understand that the Westminster Fire Department, its staff, employees, volunteers, or agents are under no obligation or duty to provide a physical examination or other evidence of my fitness to participate in these activities; said examination being my sole duty and responsibility.

I agree to follow the rules established by the instructors, and to exercise reasonable care while participating in the program. I understand that if I fail to follow the instructor’s rules and program regulations or if I fail to exercise reasonable care, I can be removed from the program. I understand that I do not become an employee/volunteer of the Westminster Fire Department via my participation in the program.

By executing this agreement, I certify that I have read this agreement in its entirety, understand all listed terms, and have had any questions regarding this agreement, or its effect satisfactorily answered.

I sign this release freely and voluntarily.

_____ / ____ / ____
Signature of Applicant Date