



CLALLAM 2 FIRE-RESCUE

VOLUNTEER INTEREST CARD

VOLUNTEER INTEREST CARD

Instructions: Please complete this form and return to the Volunteer Coordinator via email to ahughes@clallamfire2.org, mail or hand deliver to the District's Administration office at 1212 E. First Street, Port Angeles, WA 98362

Name: _____ Email Address: _____

Address: _____ Phone: _____

How did you hear about our program? _____

Program Interest: Please select the program(s) that you are interested in.

Volunteer Firefighter

Volunteer EMT

Fire Explorer Scout (Must be between 15 – 18 yrs. old)

Other

If you selected **other**, please describe your interests:

Are you able to attend Tuesday night drills from 6:30 to 9:30 pm? Yes No

Do you have any prior fire service experience, if so, please describe:

Fire District Review:

Date Received: _____ Received by: _____

Follow-up Initiated: _____

Comments: _____
