



Prospective Cadet,

Please fill out the following pages of the White Marsh Volunteer Cadet Application and return to the station, along with a copy of your current report card.

Once your application has been processed a member of the Cadet Leadership team will be in contact with you to set up your interview date. The interview is nothing to be nervous about, it is simply our way to get to know more about you. There will be members of the Cadet leadership team and a Cadet present during the interview. Your parents are more than welcome to stay during your interview which will last approximately 15 minutes.

In the meantime, should you have any questions, please feel free to contact the Cadet Advisor, Dave Hull at [david.hull@wmvfc.org](mailto:david.hull@wmvfc.org).

Thank you,

The Cadet Leadership Team of the White Marsh Volunteer Fire Company



## WHITE MARSH VOLUNTEER FIRE COMPANY

### Cadet Application

#### Applicant Information

Name: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: Maryland Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

#### Parent Information

Parent/Guardian: \_\_\_\_\_

Address (If different from above):  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Parent/Guardian Consent: I \_\_\_\_\_ give permission for my son/daughter to participate in the White Marsh Volunteer Fire Company Cadet Program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

How did you hear about our Cadet Program? \_\_\_\_\_

White Marsh Volunteer Fire Company  
10331 Philadelphia Road  
White Marsh, MD 21162  
410-887-5770  
[www.wmvfc.org](http://www.wmvfc.org)



## WHITE MARSH VOLUNTEER FIRE COMPANY

### Cadet Program Consent, Waiver, and Release Form

I have voluntarily applied to join the White Marsh Volunteer Fire Company Cadet Program. As part of this application, I agree and understand that the use of all equipment, tools, apparatus, and participation in any department activities shall be at my own risk.

Based on my understanding and acceptance of the risks involved in participating in the Cadet Program and in consideration of accepting my application to participate in activities of the Cadet Program, I waive and release any claims that I may have as a result of my participation in any of the program activities.

I understand that as a participant in the Cadet Program I may encounter firefighter and emergency medical training at the fire department.

I/We, as parent(s) of the undersigned, agree and acknowledge that there are risks associated with firefighting activities and being in and around a fire station. In spite of these risks, I/we authorize my/our child to be involved in the Cadet Program and accept the fact that there may be risks involved. I/We further hereby indemnify and hold harmless the White Marsh Volunteer Fire Company from and against all injuries, claims liabilities, cause of action, damages, and adverse actions arising as a result of my child's actions or omissions, or the actions or omissions of a third party, and whether arising on behalf of my child.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I/We, the undersigned parent(s)/guardian(s) of \_\_\_\_\_  
Have read and understand the above waiver and release. I/We have also read and understand the Cadet Program Guidelines and Structure and give my/our consent to our Son's/daughter's participation in the White Marsh Volunteer Fire Company's Cadet Program. I/We agree to be bound by the terms of the above stated Waiver and Release for our child and ourselves.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## WHITE MARSH VOLUNTEER FIRE COMPANY

### Cadet Program Code of Conduct Agreement

Instructions: All cadets are to review this form with their parent/guardian. The cadet and parent/guardian must sign the form and return it to the cadet program administrator.

Cadets are expected to follow the rules and regulations that guide the cadet program. It is a privilege to be a WMVFC Cadet. To serve as a reminder the following bullet points should be reviewed:

- Cadets must present themselves in a presentable and respectful manor. Cadets shall **wear** issued or purchased company clothing during details/**training** and any cadet gathering. Offensive clothing will not be tolerated.
- Cadets shall be respectful to each other, cadet staff, general membership, and the public.
- Cadets while in uniform or on company property shall not perform any public display of affection, use alcohol or tobacco products or engage in the use of offensive or vulgar language. Smoking is prohibited by law. Any use of drugs or alcohol will cause for a dismissal from the program.
- Harassment is not tolerated (including texting and/or phone calls). The White Marsh Volunteer Fire Company has a zero tolerance for harassment.
- Threats, bullying and fighting will not be tolerated (verbal, emotional, physical).
- Destroying or taking of company property is not tolerated.
- Tampering with any equipment, apparatus, and or turn out gear will not be tolerated.
- No items that are deemed as a weapon by the WMVFC Cadet staff will be allowed and/or tolerated either while at WMVFC or offsite in the community.

Should any member of the cadet program have an issue with another cadet, program administrator, cadet staff, or fire company personnel; they should first attempt to resolve the issue. After attempted resolution they should notify the cadet program administrator. If the offense or complaint is time sensitive, involves legal action, involves the program administrator or cadet staff, and or needs immediate attention the President of WMVFC should be notified. Parents are required to notify the Cadet Program Administrator of issues that may arise.

By signing below, I acknowledge that I have read and understand the conduct agreement for the White Marsh Volunteer Fire Company Cadet Program.

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(Cadet)

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(Parent/Guardian)

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(Date)



## WHITE MARSH VOLUNTEER FIRE COMPANY

### Cadet Program Emergency Information Packet

Cadet: \_\_\_\_\_ LOSAP: \_\_\_\_\_  
Parent/Guardian: \_\_\_\_\_

#### Emergency Contact #1

Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Additional Number: \_\_\_\_\_

#### Emergency Contact #2

Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Additional Number: \_\_\_\_\_

#### Emergency Contact #3

Name: \_\_\_\_\_ Relation: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Additional Number: \_\_\_\_\_

**Please fill out the information**

**Known Allergies/Reactions (Food, medicine, insects, and others):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Does the cadet utilize any emergency medication (ie. Epi-pen, Albuterol, etc)?**

**Does the cadet have any major medical history that may impact their activities during the program (Asthma, heart conditions, diabetes, etc)?**

\_\_\_\_\_  
\_\_\_\_\_