

# BEDFORD HILLS FIRE DEPARTMENT JUNIOR CORP. OPERATING GUIDELINES

## **PURPOSE:**

The purpose of the Bedford Hills Fire Department Junior Corp. is to stimulate interest and train qualified youths for volunteer fire service in the Bedford Hills Fire District.

## **GOVERNING BODY:**

The Junior Corp. committee will govern the Bedford Hills Fire Department Junior Corp. The committee will also appoint the department liaison, which will directly supervise the Corp. In addition, the liaison will coordinate and notify the Chief of Department of all activities or drills planned for the Junior Corp. The Junior Corp. committee will meet semi-annually to monitor and discuss the activity of the Corp.

## **FUNDING:**

Funding for the Junior Corp. will derive from the following two sources:

- Fund raising activities by the Junior Corp
- Department operating budget

## **MEMBERSHIP QUALIFICATIONS:**

Age Limits- 15 to 16 years of age.

Residence requirements will be the same as the Bedford Hills Fire Department By-Laws for active membership.

Written consent of parent or legal guardian (to be submitted with application).

Written confirmation from a Medical Doctor as to a satisfactory physical condition of applicant.

A \$15.00 fee must accompany this application. *(Checks Payable to Bedford Hills Junior Corp.)*

Upon a Junior Corp. Member reaching his or her 17<sup>th</sup> birthday, they must apply for full membership to the department or resign membership in the Junior Corp.

## **FUNCTION:**

The Bedford Hills Fire Department Junior Corp. will function as a support unit to the Bedford Hills Fire Department.

Under **NO** circumstances will a Corp. member enter a burning building or respond to a Hazardous Materials Call (Haz Mat Incident).

The primary function of the Corp. will be to assist with any tasks assigned by the Officer in Charge (OIC) or Member of The Bedford Hills Fire Department during or after an emergency or disaster as long as it is permitted by the Guidelines of the Bedford Hills Fire Department Junior Corp.

# BEDFORD HILLS FIRE DEPARTMENT

## *JUNIOR CORP. OPERATING GUIDELINES*

### **FUNCTION: CONTINUED**

The tasks may consist of, one or more of the following, but not limited to:

- Establishing a fire line
- Packing Hose
- Manning a hydrant
- Changing SCBA bottles
- Recruit new members for the Junior Corp.
- Take an active role in Fire Prevention

### **REGULATIONS:**

Junior Corp. members are not allowed to ride the first due apparatus to any alarm unless permission is granted by an Officer. (Chief, Asst. Chief, Captain or Lieut.)

Members 15 years of age may **NOT** under any circumstances respond to **ANY** alarms. 15-year-old members are limited to work details and supervised trainings only.

Members 16 years of age may respond to an alarm at any hours of the day with the exception of school hours. Corps. Members may **NOT** under any circumstances leave school to attend an alarm. (Fire Pagers may not be carried to school.)

Corp. Members will not be given keys until they are voted in as a Probationary Firefighter at age 17.

Junior Corp. members are **NOT** allowed to be inside, outside, or on firehouse property unless an **OFFICER OF THE DEPARTMENT IS PRESENT.(CHIEF'S, CAPTAINS OR LIEUTENANTS)**

Corp. Members are not allowed to stay at the firehouse for more than three hours per day. (Exception: Firematic function or permission of Jr. Corp. Lieutenant)

Junior Corp. members are **NOT** allowed to be inside, outside, on firehouse property, or at a firematic function after (10:00 PM Sunday-Thursday) and (11 PM on the weekend or during school recess).

*\*\*\*\*The only exception to the curfew is an alarm for 16 year old members.*

*\*\*\*\*There are no exceptions to the curfew for 15 year old Corp. members.*

Junior Corp. members are strictly prohibited from using or displaying a blue light in their own vehicle or any vehicle they may respond to the firehouse with.

Corp. members are prohibited from using alcoholic beverages and controlled substances as well as tobacco and tobacco products.

# BEDFORD HILLS FIRE DEPARTMENT

## *JUNIOR CORP. OPERATING GUIDELINES*

### **REGULATIONS: CONTINUED**

Bedford Hills Fire Department Junior Corp. members must attain at least a “C” grade average. (Permission for Committee to check with school on quarterly basis for GPA must be submitted with application.)

Junior Corp members may attend monthly meetings, but do not have voting rights.

### **APPLICATION PROCESS:**

- Submit a completed application with the application fee.
- Await contact from the Advisor to arrange a meeting with parent(s) and the applicant. Applicant will then fill-out the New York State Arson Background Check Form.
- After the meeting with parent(s) and applicant, the application and associated forms will be processed. The Advisor will contact the applicant once the application has been processed and approved.

# BEDFORD HILLS FIRE DEPARTMENT

*PROUDLY SERVING SINCE 1903*

## APPLICATION FOR MEMBERSHIP

Junior Corp. (Age 15 and 16)

Name: \_\_\_\_\_ Soc. Sec. #: \_\_\_\_\_

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

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ U.S. Citizen: Yes or No (circle)

Telephone #: \_\_\_\_\_ E-mail Address \_\_\_\_\_

Driver License #: \_\_\_\_\_ License Class: \_\_\_\_\_

Has Your License Ever Been Suspended or Revoked? \_\_\_\_\_ If Yes, Why? \_\_\_\_\_

Do You Have A Police Record? \_\_\_\_\_ If Yes, Explain: \_\_\_\_\_

What High School are you currently enrolled in? \_\_\_\_\_

Employer's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Fire Service Background: \_\_\_\_\_

Certifications: \_\_\_\_\_

What Organizations Do You Hold Membership In? \_\_\_\_\_

Blood Type: \_\_\_\_\_ Insurance Beneficiary (Name): \_\_\_\_\_ (Relationship): \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Telephone#: \_\_\_\_\_

I certify that the above statements are true to the best of my knowledge and that I have lived in the Bedford Hills Fire District for the past six months immediately prior to the filing of this application.

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

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

# ***BEDFORD HILLS FIRE DEPARTMENT***

*332 Bedford Road  
Bedford Hills, New York 10507  
www.bedfordhillsfd.org*

Proudly Serving Since 1903

## **Junior Corp.**

Joseph Lombardo, *Chairman*  
Jonathan Spano, *Advisor*  
Santo Curro  
Scott Marinaro

Brian McGill  
William Nickson  
John Norcia  
Richard Palmesi

### **EMERGENCY CONTACT INFORMATION**

#### **Emergency Contact – 1**

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

#### **Emergency Contact – 2**

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

# ***BEDFORD HILLS FIRE DEPARTMENT***

*332 Bedford Road  
Bedford Hills, New York 10507  
www.bedfordhillsfd.org*

Proudly Serving Since 1903

## **Junior Corp.**

Joseph Lombardo, *Chairman*  
Jonathan Spano, *Advisor*  
Santo Curro  
Scott Marinaro

Brian McGill  
William Nickson  
John Norcia  
Richard Palmesi

### **PARENTAL PERMISSION**

I \_\_\_\_\_ GIVE MY SON/DAUGHTER \_\_\_\_\_ PERMISSION  
(PRINT NAME) (PRINT NAME)

TO JOIN THE BEDFORD HILLS FIRE DEPARTMENT JUNIOR CORP. I HAVE READ THE ATTACHED GUIDELINES WITH MY SON/DAUGHTER AND UNDERSTAND THEM.

I GIVE THE BEDFORD HILLS FIRE DEPARTMENT PERMISSION TO CHECK WITH MY SON/DAUGHTER'S SCHOOL TO ENSURE THAT A "C" AVERAGE IS MAINTAINED.

I UNDERSTAND THAT A VIOLATION OF ANY OF THE GUIDELINES MAY RESULT IN SUSPENSION OR EXPULSION FROM THE DEPARTMENT.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SPELL NAME

\_\_\_\_\_  
SPELL NAME

**GUARDIAN**

**APPLICANT**

# ***BEDFORD HILLS FIRE DEPARTMENT***

*332 Bedford Road  
Bedford Hills, New York 10507  
www.bedfordhillsfd.org*

Proudly Serving Since 1903

## **Junior Corp.**

Joseph Lombardo, *Chairman*  
Jonathan Spano, *Advisor*  
Santo Curro  
Scott Marinaro

Brian McGill  
William Nickson  
John Norcia  
Richard Palmesi

### **MEDICAL RELEASE**

I \_\_\_\_\_ IN MY OPINION FEEL THAT \_\_\_\_\_  
(DOCTOR PRINT NAME) (APPLICANT PRINT NAME)

IS CAPABLE OF PERFORMING THE STRENUOUS ACTIVITIES REQUIRED OF A  
FIREFIGHTER WITHOUT ANY RESTRICTIONS.

\_\_\_\_\_ APPROVED

\_\_\_\_\_ DENIED

\_\_\_\_\_ RESTRICTED (*LIST RESTRICTIONS BELOW*)

RESTRICTIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
SPELL NAME

\_\_\_\_\_  
SPELL NAME

**GUARDIAN**

**PHYSICIAN**

\*\*\*\*\* PLEASE NOTE:

IT IS THE SOLE RESPONSIBILITY OF THE GUARDIAN TO ADVISE THE BEDFORD HILLS FIRE DEPARTMENT OF ANY CHANGES IN MEDICAL CONDITION OF THE ABOVE NAMED APPLICANT SINCE SUBMISSION OF THIS FORM.