

ECCA MEMBERSHIP APPLICATION




Elm Creek Citizens Association
 E.C.C.A. Fire Department
 349 CR 278 Tuscola Texas 79562 www.eccafire.com
ecca@eccafire.com Non-emergency 325-572-3987



APPLICANT INFORMATION

| | | |
|---------------------------------------|-----------------|-------------------|
| Name: | Email: | Date of birth: |
| Current 911 address in ECCA district: | | |
| City: | State: | ZIP Code: |
| Mailing address (If different): | | |
| City: | State: | ZIP Code: |
| Home Phone: | Cell Phone: | Other: |
| May we contact you? | For Emergencies | For announcements |

ADDRESS SIGNS

| | |
|--|--|
|  | One of the most effective tools you can have in case of an emergency is a clear and visible address sign. ECCA has address signs made that are red with reflective white letters and numbers. These signs allow Fire, Law Enforcement, and Medical services to locate your home. These signs are available for \$15 each. For questions about these signs or to place an order, please contact Janel at 325-572-3045 |
|--|--|

INTERESTED IN HELPING? (Please check the areas your are willing to help)

| | | |
|--------------|-------------------|-------------|
| Firefighting | Emergency Medical | Maintenance |
| Training | Reports/Grants | Other: |

SIGNATURES

| | |
|--|-------|
| Signature of applicant: | Date: |
| Comments, questions, or other information: | |

Please include a payment of **\$24 for 1 year household membership** fee.
 ECCA's regular monthly meeting is every 3rd Tuesday 7pm (1900) at station 1

Please fill out this information if you would like to volunteer as a Firefighter or First Responder. This information is needed for insurance purposes, background check, and certification information. It is MANDATORY that we have this information, but it WILL NOT be shared or distributed for anything other than official ECCA business.

| | | |
|--------------------------|------------------|-----------------|
| Social Security# | DOB | Driver License |
| SFFMA# (if you have one) | Current Employer | Your supervisor |

List information about your driving record (tickets, DWI, etc.) and your criminal history.

References (Name, address, phone number, etc.)

| |
|--|
| |
| |
| |