



# City of Margate Fire Rescue Explorer Program Application for Membership

1811 Banks Road  
Margate, FL 33063



Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_ Sex: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone#: (\_\_\_\_) \_\_\_\_\_ Cellular#: (\_\_\_\_) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_

Driver License or State ID #: \_\_\_\_\_

Have you ever been a cadet for any Police or Fire Rescue agency? Yes / No

If so, please list all agencies: \_\_\_\_\_

Have you ever been arrested or issued a Notice to Appear? Yes / No

If so, please describe: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Emergency Contact#: (\_\_\_\_) \_\_\_\_\_ Relationship: \_\_\_\_\_

Allergies: \_\_\_\_\_

Upon signing this form you will be placed on a three-month probation period.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_