



# SAVES

SOUTHEASTERN ADAMS VOLUNTEER EMERGENCY SERVICES INC.  
ADAMS COUNTY COMPANY 29

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5865 Hanover Road • Hanover, PA 17331-8966 • Phone (717) 637-9621 • Fax (717) 637-4910 • [www.company29.org](http://www.company29.org)

Thank you for your interest in the Southeastern Adams Volunteer Emergency Services organization. As you complete the application, please follow these guidelines.

- Print clearly or type all requested information.
- Be sure to fill out the application completely.
- Be sure to read the Release Authorization, sign, date and provide information as requested to avoid any delay in processing your application.
- Be advised that you may **not attend** any meetings of our organization until you have been approved for membership.
- You will be required to have an interview with the Membership Committee before your application is finalized. Someone will contact you to set up a time for the interview.
- Be advised that your application may take a few months to process.
- For those applying for SAVES Junior organization (age 14 through 17) be sure to attach your working papers with the application. Working papers can be obtained through your educational institution.
- Send your application fee and dues along with the completed application to:

Southeastern Adams Volunteer Emergency Services, Inc.  
C/O Membership Committee  
5865 Hanover Road  
Hanover, PA 17331

- After your application has been reviewed and all processing completed, you will be notified in writing of the resulting decision.

Thank You

Diane Groft  
Membership Secretary



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## Application for Membership

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

Please mark, which you are interested in.

- Fire

- EMS

- Social Member

Name: \_\_\_\_\_  
Last First Middle Maiden

Social Security # \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Phone: (\_\_\_\_) \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ Work/Cell

Proposed by: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_

Do you belong to Adams County Volunteer Emergency Services Association through another company?

YES or  NO

If yes, please give company name: \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor?

YES or  NO

If yes explain in detail: \_\_\_\_\_

Application Fee: \$12.00

Dues: \$8.00

Total due with Application: \$20.00

Upon acceptance into membership, the applicant must serve a six-month probation period.

The undersigned, by this indenture, hereby agrees to exonerate the Southeastern Adams Volunteer Emergency Services from any and all liability in the event of injury or death as a result of the performance of my duties as a member of aforesaid company.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

If minor, signature of parent or guardian: \_\_\_\_\_ Date: \_\_\_\_\_

