



PLANTATION FIRE DEPARTMENT

CADET APPLICATION



Complete all sections and forms, as any incomplete applications will delay the enrollment process. Upload the required documents Child's Birth Certificate, Social Security Card, health insurance (if any), and Florida State issued Driver License or Identification card, and current School issued photo ID. Parents or Guardian must upload a copy of their State issued Florida driver's license or identification card.

*Any questions contact Plantation Fire Administration
550 NW 65th Ave. Plantation, FL 33317
(954) 797-2150*



General Membership Requirements

1. Applicants must be between the ages of 14 and 18 years of age.
2. Parental approval must be obtained.
3. School transcripts demonstrating a 2.0 grade point average, or better, must be enclosed with the application.
4. Copy of Birth Certificate must be enclosed with application.
5. The applicant must be in good health and without physical condition(s) that will endanger them, or another member of the Fire Department.
6. The applicant must be of good character and possess good moral habits. Driving records will be considered.
7. None of the above requirements is intended to be an automatic disqualifier.
8. Must maintain monthly, quarterly, and annual training as indicated in the bylaws.

All of the above are taken into consideration when considering an applicant. If you feel that there are special circumstances that should be considered when applying, contact the Fire Cadet Coordinator.



Applicant Packet

Last Name:	First Name:	M.I.
-------------------	--------------------	-------------

Address:

City:	State:	Zip Code:
--------------	---------------	------------------

Home Phone:	Cell Phone:
--------------------	--------------------

EMAIL:

Date of Birth:	Age:	Grade:	SSN#:
-----------------------	-------------	---------------	--------------

Current School:	Dates Attended:
------------------------	------------------------

Previous School:	Dates Attended:
-------------------------	------------------------

Medical/Emergency Information

Insurance Company:	Policy #:
---------------------------	------------------

Emergency Contact	
Name:	Phone Number:
Name:	Phone Number:
Parent/Guardian EMAIL:	



I solemnly swear and affirm that the answers that I have made to each and all of the questions, whether in writing or in print, are true and complete to the best of my knowledge and belief. I agree and understand that any misstatements of material facts contained herein will be cause for forfeiture on my part to all rights to membership in the Plantation Fire Cadet Program.

Applicant Print Name

Parent/Guardian Print Name

Date

Date

Applicant Signature

Parent/Guardian Signature



**CADET PROGRAM RELEASE AND WAIVER FOR MINOR NOTICE TO
THE MINOR CHILD'S NATURAL GUARDIAN PURSUANT TO SECTION
744.301 FLORIDA STATUTES**

**READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE
AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY
DANGEROUS ACTIVITY.**

**YOU ARE AGREEING THAT EVEN IF THE CITY OF PLANTATION USES
REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A
CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY
PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN
DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE
AVOIDED OR ELIMINATED.**

**BY SIGNING THIS FORM, YOU ARE GIVING UP YOUR CHILD'S RIGHT
AND YOUR RIGHT TO RECOVER FROM THE CITY OF PLANTATION
IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO
YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM
THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY.**

**YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE
CITY OF PLANTATION HAS THE RIGHT TO REFUSE TO LET YOUR
CHILD PARTICIPATE IF YOU DO NOT SIGN.**



In consideration of the City of Plantation granting my child permission to participate in the Fire Cadet Program ("Program"), _____ (parent/guardian) give permission for my minor child _____, to participate in the Program and hereby agree to sign this Release and Waiver.

Accordingly, I, both individually and in the representative capacity of my child, agree to unconditionally release, waive, and discharge the City of Plantation, its Council members, employees, agents, and servants, all hereafter referred to as "releases," from all claims and courses of action, that I, my personal representatives, assigns, heirs, and next of kin, may have for any loss, damage, or injury to person or property, whether caused by the negligence, or otherwise of the releases. In addition, I agree to release against all claims, demands, and actions arising out of either my own and/or my minor child's actions or involvement with the City of Plantation.

I certify and warrant that my minor child is in good health and physical condition and is able to participate in the Program.

Additionally, I agree that my minor child will adhere to all applicable rules and regulations of the City of Plantation and its Fire Department.

I have carefully read the foregoing release and waiver, including the statutory notice on the first page, and know the contents thereof. I fully understand the risks that my child may encounter with his/her involvement and activity with the Program.

I understand the contents of this Release and Waiver and I am signing this Release and Waiver as my own free act. I expressly agree that this Release and Waiver is intended to be as broad and as inclusive as permitted by the laws of the State of Florida, and that if any portion thereof is held invalid, it is agreed that the balance shall notwithstanding, continue in full force and effect.

In Witness Whereof, I have executed this Release and Waiver on

Date

Signature of Parent/Guardian

Printed Name of Parent/Guardian

WITNESS:

Signature of Witness

Printed Name of Witness



As the parent/guardian of the minor child applying for membership to the Plantation Fire Cadet Program, I hereby authorize the Plantation Fire Department to verify any and all facts listed on this application, and to contact any references listed.

Parent/Guardian Signature

Date

As the parent/guardian of the minor child applying for membership to the Plantation Fire Cadet Program, I hereby give my permission for my child to become a member of the Plantation Fire Cadet Program.

Parent/Guardian Signature

Date

Driver's License #/State



Parent Release Form for Media Recording

I, the undersigned, do hereby grant or deny permission to the Plantation Fire Cadet to use the image of my child, _____ as marked by my selection(s) below. Such use includes the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the Plantation Fire Cadet website.

(Check One Option Below)

- Deny permission to use my child's image.

- Grant permission to use my child's image for city publication or Plantation Fire Cadet Program, not for profit. I understand that no compensation will be received for my child's participation.

Parent/Guardian Signature

Date