ROBINS VOLUNTEER FIRE DEPARTMENT
225 South 2ⁿᵈ St
Robins, IA 52328
319-395-7174
MEMBERSHIP APPLICATION

       This completed form will be submitted to the Robins Volunteer Fire Department's secretary during the regular business meeting. All applications will be subject to a limited background investigation and will be required to sign an information release form. All applicants must be at least 18 years old to join. Under-age applicants are eligible for a junior fire fighter position and their JFF application must be filled out and signed by a parent or guardian and the chief.

       The RVFD is a funded department and no out-of-pocket expenses are anticipated. The Robins Fire Department will pay for the completed EMR, EMT and AEMT schooling. All in-service training is free and each volunteer will receive a stipend of $15.00 per meeting/training. All firefighters responding to a call for service will receive a stipend of $30.00. These rates are as of fiscal year 2025-2026 and are subject to annual increases as the city council dictates. As a member, you will be expected to attend regular meetings, drills, work on committees and respond to calls for service.

Name:_____ DOB:___/___/___ SS#:_____

Telephone#: H_____ Cell_____ Email_____

Address:_____ City:_____ State:___ Zip:_____

Do you have a valid Iowa Driver's license: Yes___ No___ DL Number:_____

Your vehicle Insurance Company:_____ Telephone #:_____

Policy Number:_____ have you ever been suspended: Yes__ No__

Have you been convicted of any crime other than misdemeanor traffic charges? Yes__No__ If so what was the charge/date_____

Are you: Married___ Single___ Divorced___ Number of dependents____

Spouse's Name_____ Emergency Contact #_____

Occupation:_____ Employer:_____ Phone #:_____

Are you able to leave work if an emergency occurs: Yes___ No___

Do you have prior fire fighter skills: Yes___ No___ if so what skills_____

Do you have prior EMS skills: Yes___ No___ if so what skills_____

If recommended by a present RVFD member, His/Her name_____

Your signature below verifies that all information you have provided on this application is true and valid and given with no intent to deceive or mislead.

Applicant Signature:_____ Date:_____