



# LINDEN FIRE DEPARTMENT JUNIOR FIRE ACADEMY

June 28 – July 2, 2021

8:00 AM – 3:00 PM

\*Recruit is responsible for bringing their own lunch

- Available to Linden students graduating 7<sup>th</sup> and 8<sup>th</sup> grades.
- Learn about the Linden Fire Department, its operations, and explore a future career in Fire Fighting.
- Receive basic training in: physical fitness, department procedures/operations, fire science, Haz Mat, first aid and CPR.
- Demonstrations: Engine and Ladder Truck operations, Rope rescue, Car extrication, Haz Mat, and more!
- Have Fun!!!!!!!!!!

[Pick up applications at Linden Fire Headquarters 302 S. Wood Ave.](#)

[Monday - Friday 8am-3pm or online at](#)

[www.linden-nj.org/departments/fire](http://www.linden-nj.org/departments/fire)

**THE DEADLINE FOR APPLICATIONS IS MAY 13, 2021 AT 3:00 PM**

**Applications must be dropped off at Linden Fire Headquarters**

Enrollment will be on a first come, first serve basis. Spaces are limited.

Any questions, contact:

Deputy Chief Kevin Brady

908-474-4550 or [kbrady@lfdnj.org](mailto:kbrady@lfdnj.org)



# LINDEN FIRE DEPARTMENT

## Junior Fire Academy

### June 28 – July 2, 2021

Please fill out the following information to reserve a space in the up-coming Linden Fire Department Junior Fire Academy. Applications do not guarantee participation as spaces are limited. Applications must be filled out in its entirety and returned to the front-desk at Linden Fire Headquarters. **Please Print. Applications are due by May 13, 2021 @ 3:00PM**

Full Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email Address (Parent): \_\_\_\_\_

Birth Date: \_\_\_\_\_ Male:  Female:  Grade Entering in Fall 2021: \_\_\_\_\_

School: \_\_\_\_\_

Parent/Guardian's Name(s): \_\_\_\_\_

Parent's Work Phone: \_\_\_\_\_ Parent's Cell Phone: \_\_\_\_\_

Alternate Contact Phone: \_\_\_\_\_

#### Cadet Uniform Information

T-Shirt Size (Check One): **Youth:** L  **Adult:** S  M  L  XL

Short Size (Check One): **Youth:** L  **Adult:** S  M  L  XL

**NOTE: All recruits will be issued two (2) Shirts, two (2) pairs of shorts, and one (1) baseball cap. Recruits are responsible to wear the listed uniform each day of the academy. Please provide accurate size for your child. Uniforms sizes cannot be changed once ordered.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

#### Official Use Only:

Application Complete: Yes:  No:  Initials: \_\_\_\_\_

E.M.I.F. Complete: Yes:  No:  Initials: \_\_\_\_\_

Liability Form Signed: Yes:  No:  Initials: \_\_\_\_\_

Code of Conduct: Yes:  No:  Initials: \_\_\_\_\_

Photography Release: Yes:  No:  Initials: \_\_\_\_\_

UCFA Hold Harmless: Yes:  No:  Initials: \_\_\_\_\_

Approved / Denied  
(Circle One)



# LINDEN FIRE DEPARTMENT

## Junior Fire Academy

June 28 – July 2, 2021

### Emergency Medical Information Form

*Medical Form must be filled out in its entirety. **Please Print.** Dependent on the applicant's past medical history, the City of Linden maintains the right to request a doctor's note for participation in any and all physical activities. This must be submitted prior to the first day of the academy. Supplied information will only be used in the event of a medical emergency.*

Full Name: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Male:  Female:

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Past Medical History: \_\_\_\_\_

\_\_\_\_\_

Other Pertinent History: \_\_\_\_\_

\_\_\_\_\_

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

Medications: \_\_\_\_\_

\_\_\_\_\_

Primary Care Physician: \_\_\_\_\_

Primary Care Physician's Telephone: \_\_\_\_\_

Health Insurance Carrier: \_\_\_\_\_

Preferred Hospital: \_\_\_\_\_

\_\_\_\_\_

### **Emergency Contact Information**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_



# LINDEN FIRE DEPARTMENT

## Junior Fire Academy

### Code of Conduct

1. There will be no use and/or possession of tobacco products or drugs. Any student found to be in violation of this code will be immediately dismissed.
2. Students are required to arrive at Union County Fire Academy located at 710 Lower Rd. Linden NJ, no later than 7:55 am. Students must be picked up no later than 3:00 pm
3. Students are expected to adhere to academy rules and regulations.
4. Students are required to obey all orders of academy instructors and are not to leave the classroom without expressed permission of the instructor.
5. Should a student become ill or injured, he/she is to report immediately to an instructor.
6. Use of obscene, vulgar, or profane language will not be tolerated.
7. Students will conduct themselves in a professional manner at all times.
8. Students will address instructors as sir or ma'am. Yes/no sir, or yes/noma'am.

### Dress Code

This academy has been developed to give each student the best possible learning experience. Therefore, it is necessary that students present themselves in a neat and well-groomed manner. A uniform consisting of hat, shorts, tee shirt, white socks, and sneakers will be worn at all times. Hair must be neat and not a distraction to other students. Wearing of jewelry is prohibited.

### Student Behavioral Contract

The purpose of this contract is to inform the undersigned student that he/she must comply with the provisions of the Linden Fire Department Junior Fire Academy and to specific terms set forth in this contract. The student understands that due to the nature of this academy, there will be zero tolerance rules in effect. Undesirable conduct, such as horseplay or a violation of the student code of conduct, will result in immediate removal of the student from the academy. This contract is in effect for the safety of all students and to maintain discipline and order. This contract represents an agreement by the student that he/she received a copy of the Code of Conduct and the student agrees to adhere to this code at all times while at the academy.

---

Applicant Name: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_



# LINDEN FIRE DEPARTMENT

## Junior Fire Academy

### Release of Liability Form

I, \_\_\_\_\_ the undersigned Parent/Guardian of

\_\_\_\_\_, residing at \_\_\_\_\_ in Linden, New Jersey,

do hereby give my son/daughter permission to attend the Linden Fire Department Junior Fire Academy and in consideration of allowing him/her to participate in the above named program, I voluntarily and knowingly release and discharge the Junior Fire Academy, Linden Fire Department, City of Linden, facilities managers, and all instructors and participants in this program as well as all others who may be liable from all claims, present and future, known or unknown, in any manner arising out of his/her participation in the Linden Fire Department Junior Fire Academy. Participants will have the opportunity to be physically conditioned, including but not limited to daily physical training, and agility course; tour the Linden Fire Department, Union County Fire Academy and will be viewing demonstrations from city and county assets. Recruits will be transported to the Union County Fire Academy in Linden and all Linden Fire Stations. Applicants will be held to an understanding of a paramilitary rank structure and the Code of Conduct set by the Linden Fire Department. If at any time a recruit is sick, receives an injury, or will not be participating in a scheduled event, the Linden Fire Department shall be contacted, via the Fire Headquarters main desk at (908) 474-8611, at least two (2) hours prior to the scheduled arrival time so that a report may be filed. Failure to comply may result in discharge of the recruit.

This hold harmless agreement is a testament to my understanding of the above evidenced by my signature below.

---

Signature of Applicant: \_\_\_\_\_

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

Signature of Parent/Guardian: \_\_\_\_\_

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



# LINDEN FIRE DEPARTMENT

Junior Fire Academy

## Photograph Release Form

Linden Fire Department

302 S. Wood Avenue

Linden, NJ 07036

Permission to Use Photograph

I grant the Linden Fire Department, its representatives, employees and/or their designee the right to take photographs of me and my property in connection with the Linden Fire Department Junior Fire Academy. I authorize the Linden Fire Department, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that the Linden Fire Department may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Applicant's Name (Print): \_\_\_\_\_

Organization Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**FIRE ACADEMY HOLD HARMLESS AGREEMENT**

Name of Participant: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

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

Telephone Number: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Event/Organization: \_\_\_\_\_ Date: \_\_\_\_\_

The undersigned parent/guardian/participant (collectively the "Undersigned"), personally agrees to indemnify and hold harmless, from any and all liability, the County of Union, the Union County Fire Academy, and all of its officers, employees, servants, and agents, for any and all claims, costs and expenses, including reasonable attorney's fees, resulting from personal injury, or property damage arising from the participant's involvement with event operations at the Union County Fire Academy.

The Undersigned, for himself/herself, his/her heirs, executors and administrators, waives, releases and forever discharges any and all rights and claims for damage which he/ she may hereafter accrue arising out of or connected with the participant's involvement in this event.

The Undersigned understands there may be physical activity, including participating in fire training exercises and that such activities involve certain risks or personal injury. With the Undersigned's signature on this form, he/she is representing the participant does not have any health problems or physical limitations that would be affected by participation in such physical activities. The Undersigned understands the event may include a supervised demonstration of a real fire and the techniques used to extinguish same.

By signing this Agreement, ***the Undersigned acknowledges and represents he/she has read, understands, and voluntarily signs this Hold Harmless Agreement*** for full, adequate, and complete consideration fully intending to be bound by same.

\_\_\_\_\_  
Parent/Guardian/Participant (Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian/Participant Signature

\_\_\_\_\_  
Date