



DUNN'S CORNERS FIRE DEPARTMENT
1 Langworthy Road
Westerly, Rhode Island 02891
401-322-0577

Parental Permission Slip

We/I _____
(Parent or Guardian)

here-by give permission for my

daughter / son _____ to be
(Please print name)

able to respond to emergency calls between the hours of 10:00 PM
and 6:00 AM.

***The above agreement will go into effect 2 months after being
accepted as a Junior Member into the department. No Junior
members who have not been a member for less than 2 months
will be allowed to respond to nighttime calls until that point.***

Signature (Parent or Guardian)

Signature (Junior Member)

Date