

VOLUNTEER STATEMENT OF COMMITMENT TO

William B. Mawhinney Memorial Ambulance Corps Inc. / Hawthorne Volunteer Ambulance Corps

As a member of the William B. Mawhinney Memorial Ambulance Corps Inc. / Hawthorne Volunteer Ambulance Corps, I hereby make a commitment to:

1. Give \_\_\_\_\_ hours per month
2. Attend membership meetings as scheduled.
3. Attend training sessions as scheduled.

As a member, I understand that I am a part of the staff of the William B. Mawhinney Memorial Ambulance Corps Inc. / Hawthorne Volunteer Ambulance Corps and therefore, I can be asked to resign from membership. Causes for dismissal from the volunteer staff include:

1. Failure to comply with the bylaws of the organization
2. Failure to comply with the policies and procedures of the organization
3. Failure to complete the required training programs; for example:
  - a. EMT
  - b. CPR
  - c. Others as required by the Corps
4. Failure to work minimum time per month over a period of \_\_\_\_\_ months
5. Failure to attend in-service training programs over a period of \_\_\_\_\_ months.
6. Breach of confidentiality.
7. Unethical behavior.
8. Unwillingness to follow the directions of the officers.

As a volunteer, I am also required to provide evidence of:

1. Current driver's license
2. Current certification from the Division of EMS

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

\_\_\_\_\_  
Squad Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date