



Chester County EMS Council, Inc.
601 Westtown Road, Suite 012, West Chester, PA 19380
www.ChescoEMS.org 610-344-5000

Keith Johnson – President
Charles Brogan – Vice-President
Frank Piscitello – Secretary, Frank Sullivan – Treasurer

Chester County EMS Council, Inc. – Membership Application

I hereby request to be considered by the Board of Directors of the Chester County EMS Council, Inc. for membership on the Chester County EMS Council, Inc.

I am applying for the following membership status: (Check one only)

() **Active Member:** An active member is any Chester County EMS provider (any EMS Provider who resides within Chester County or works for a licensed EMS agency of Chester County per 5.1.1.1 of the By-laws.

() **Associate Member:** An associate member is any organization or individual who does not meet the requirements for active membership with the Chester County EMS Council, Inc.

Please specify your areas of interest with the Chester County EMS Council, Inc. (Operations, Medical Advisory, Training, Emergency Preparedness, CQI, EMS Advocacy).

**INCOMPLETE FORMS WILL NOT BE CONSIDERED FOR APPROVAL.
PLEASE, TYPE OR PRINT CLEARLY – LIST PREFERRED CONTACT INFORMATION**

Name: _____

Title: _____ Agency/Service: _____

Membership Affiliation (Circle all that apply:) Emer. Resp. EMT AEMT

Paramedic PHRN Physician RN Hosp. Adm. Public Safety

Police Dispatcher Firefighter Emer. Mgt. Other: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Business: _____

Cell Phone: _____ Other: _____

E-Mail Address: _____

Applicant's Signature

Date