



## Hudson Volunteer Fire Department, Inc

### Explorer Program Guideline Acknowledgement

Date \_\_\_\_\_

I, \_\_\_\_\_ hereby acknowledge that I have received a copy of the Hudson Fire Department guidelines for the Explorer Program. I also understand if the guidelines are not followed it will be grounds for my dismissal from the program.

I, \_\_\_\_\_ hereby agree to uphold the By-Laws and the Standard Operating Procedures of this Department. I also agree to participate fully in all activities associated with this Fire Department as my personal time allows. I understand that any false statements or misrepresentation in my Explorer application will result in immediate dismissal from the program.

\_\_\_\_\_  
Explorer's name

\_\_\_\_\_  
Captain of the Explorers