



**Richford Fire Department**  
**48 Main Street**  
**Richford, Vermont 05476**



**Richford Fire Department**  
**Cadet Program Application**

**Name:**

**Date of Birth:**

**Current Address:**

**This application allows your (Son/Daughter) to participate in the Richford Fire Department Cadet Program.**

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Parent's Signature

Date

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Fire Chief's Signature

Date