



Mechanicsville Volunteer Fire Department, Inc.
Post Office Box 37
Mechanicsville, MD 20659
Non Emergency: (301) 884-4709 / Emergency: Dial 9-1-1
www.mvfd.com

CADET PERMISSION FORM

I give my son/daughter _____ permission to participate in the Mechanicsville Volunteer Fire Department Cadet Program. I have read along with my child and fully understand the guidelines of the Cadet Program. I will also provide information to the Mechanicsville Volunteer Fire Department of any known allergies that my child has, along with any medications that my child is currently taking or takes on a regular basis.

Parents Signature _____