

**Waterville and District Volunteer Fire Department
Membership Application**

Please read the membership agreement, carefully, before completing and signing this application.

Name (in full): _____

Civic Address: _____

Mailing Address: _____

Telephone number: home: _____ work: _____

Cell: _____

Are you at least nineteen years of age? Yes () No ()

Have you been convicted of a Criminal Code offence for which you have not been pardoned?
Yes () No ()

Employment

Are you presently employed? Yes () No ()

If yes, complete the following:

Employer: _____

Current supervisor: _____

Telephone number: _____

Is your employer aware of your application? Yes () No ()

Will your employer allow you to attend alarms? Yes () No ()

If no, will your employer allow you to attend a second alarm indicating a major alarm?

Yes () No ()

May we contact your present or past employers, references, and/or other organization(s) to which you belong or have belonged to regarding your application? Yes () No ()

List your last employers (prior to) your present employer:

Employer: _____ Supervisor: _____

Telephone number: _____ Dates employed to: _____

Reason for leaving: _____

List at two least Active &/or Veteran members of Waterville & District Fire Department for references:

Reference's name: _____ Phone number: _____

Reference's name: _____ Phone number: _____

Reference's name: _____ Phone number: _____

Reference's name: _____ Phone number: _____

Firefighting Experience

Have you ever been a member of another fire department or other related fire service organization?

Yes () No ()

If yes, please answer the following:

Name of department or organization: _____

Date From: _____ To: _____

Verifying Authority: Name: _____ Phone: _____

Name of department or organization: _____

Date From: _____ To: _____

Verifying Authority: Name: _____ Phone: _____

Have you ever applied for membership in a Fire Department and been rejected and/or belonged to a Fire Department and been dismissed for disciplinary purposes? Yes () No ()

If please provide details: _____

Please provide details of any firefighting experience. _____

Additional Information

Do you have a valid driver's license? Yes () No ()

Class of license: _____

List any restrictions on your license: _____

List driver's license endorsements: _____

Do you own your own motor vehicle? Yes () No ()

If no, please explain how you intend to respond to alarms: _____

If you plan to become a driver/operator you will be required to provide a driver's abstract.

Are you able to attend training each Monday evening at 7 PM? Yes () No ()

If no please explain: _____

~~~Please read the Membership Agreement carefully before signing application~~~  
~~~Please consider this carefully before submitting this application. ~~~

Waterville Fire Department responds to approximately 125 alarms per year. We have 13 Meeting a year, 12 monthly & 1 Annual (Usually held in Mar or Apr). We train on approximately 38-40 Monday nights a year (Usually 7pm - 9pm) and also sometimes on other days. Members are expected to attend 30% of the alarms (Approx. 38), 30% of the meetings (4) & 30% of the Monday night trainings (You will be credited for the other days that you take part in).

Also you will be added to a Duty Crew. The responsibility of the Duty Crews is to check over the trucks and equipment every Sunday. Your Crew will be on duty once every 7 weeks. During the Duty Sunday your Crew will be responsible for 4 trucks and other equipment. The trucks your Crew is responsible for will alternate every other Duty. Your duty crew will be expected to be in the district from Midnight Saturday to Midnight Sunday of your duty week

Fundraisers and other functions as required are necessary components that help with the successful operation of our Fire Department & our commitment to the community. These components require a considerable time commitment.

By submitting this application, I agree to the following:

- a) The information provided on this application form is, to the best of my knowledge, accurate.
- b) If elected to membership, I will abide by the Departments by-laws; attend all activities at a level considered acceptable by the Personnel Committee of the Department.
- c) I have carefully considered the responsibilities I am accepting, as outlined in the paragraph above
- d) Any member of the Department can access this application for the purposes of review deemed necessary by the membership committee.
- e) Submission of this application does not guarantee membership. Factors determining whether or not an individual becomes a member relate to other criteria including, but not limited to: an interview, a secret ballot of members in good standing and a probationary period.
- f) I understand that applications will be processed providing there is available space on the membership roster in current location and not necessarily in the order received.

Sign: _____ Date: _____

Following the interview, the applicant will be invited to sit-in on weekly trainings for one month to observe and begin to learn the way things are done, and most importantly begin to meet the other members of the department.

Note: Applications must be completed in full and received by the Waterville Fire Department prior to the first Tuesday of every month. Failure to do so could result in a delay in the processing of the application.

Applications can be delivered to the station at:
1415 County Home Rd. Cambridge NS.

Or by mail to:
Waterville and District Volunteer Fire Department
PO Box 99
Waterville, NS
BOP 1VO

For further information contact:

Corry McGuire
Home: 902-538-4305 Work: 902-538-4315 Cell: 902-599-3047
Chair, Membership Committee
Waterville Volunteer Fire Department

Applicant: Please do not write below this line.

For department use only

Committee Members' signatures indicate recommendation for membership:

_____ Date: _____

_____ Date: _____

_____ Date: _____

_____ Date: _____

_____ Date: _____

Chair

Circle one: **Accepted** **Rejected** Date: _____

_____ Date: _____

Secretary

_____ Date: _____

President