

CANNING VOLUNTEER FIRE DEPARTMENT  
2232 NORTH AVENUE  
P .O. BOX 357, CANNING  
KINGS COUNTY, NOVA SCOTIA  
B0P 1H0

APPLICATION FOR MEMBERSHIP

NAME: \_\_\_\_\_ M.S.I.# \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

S.I.N. # \_\_\_\_\_

HAVE YOU LIVED IN THE FIRE DISTRICT FOR AT LEAST A YEAR?  
\_\_\_\_\_

ARE YOU AGE 19 OR OLDER? \_\_\_\_\_ EMPLOYED BY  
\_\_\_\_\_

BENEFICIARY / NEXT OF KIN: \_\_\_\_\_

ARE YOU IN A POSITION TO HELP WITH FIRE DEPARTMENT NON  
EMERGENCY PROJECTS WHEN CALLED UPON: YES \_\_\_\_\_ NO \_\_\_\_\_

WOULD YOUR EMPLOYER PERMIT YOU TO ATTEND EMERGENCY CALLS  
DURING WORKING HOURS: YES \_\_\_\_\_ NO \_\_\_\_\_

IN CASE OF AN EMERGENCY BEYOND NORMAL CALL WOULD YOUR  
EMPLOYER ALLOW YOU TO ATTEND: YES \_\_\_\_\_ NO \_\_\_\_\_

DISTANCE FROM FIRE STATION: HOME: \_\_\_\_\_ WORK: \_\_\_\_\_

EDUCATION:  
HIGH SCHOOL: \_\_\_\_\_ COMMUNITY COLLAGE: \_\_\_\_\_ UNIVERSITY: \_\_\_\_\_

DRIVING SKILLS: PASSENGER CAR: \_\_\_\_\_  
HEAVY COMMERCIAL: \_\_\_\_\_

DRIVERS MASTER NUMBER: \_\_\_\_\_

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PAGE 2

CURRENT LICENCE CLASS: \_\_\_\_\_ DRIVING EXPERIENCE

\_\_\_\_\_

EMERGENCY / FIRE FIGHTING EXPERIENCE:

\_\_\_\_\_

IT IS THE RESPONSIBILITY OF ALL FIREFIGHTERS WHEN RESPONDING TO  
A STATION FOR AN ALARM IN THEIR PERSONAL VEHICLES TO FOLLOW ALL  
THE RULES OF THE ROAD AS SET BY THE PROVINCE OF NOVA SCOTIA.  
YOUR PERSONAL VEHICLE IS NOT AN EMERGENCY VEHICLE.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE OF APPLICATION

**NOT ALL APPLICATIONS HAVE TO BE ACCEPTED**  
SERVING THE VILLAGE OF CANNING & DISTRICT & ASSISTING WITH MUTUAL AID