



Fire Services Application for Membership

Saddle Hills County

Thank you for your interest in volunteering to protect our communities.

Date (yyyy-mm-dd):

Which Fire Department are you applying to join

Blueberry

Bonanza

Happy Valley

Savanna

Woking

Don't Know

Name *

Date of Birth *

Mailing address *

City/Town

Postal Code *

Phone (work/home) *

Cell Phone Number

Home Address

Occupation *

Current Employer *

Time with Current Employer *

Previous Employers *

Previous fire service experience *

Training courses (fire or other)

Reference 1: *

Ref. 1 Phone: *

Reference 2:

Ref. 2 Phone:

Signature

Notice of Collection

Protection of Privacy - The personal information requested on this form is collected under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. It will be used for the purpose of assessing eligibility to join the County's Fire Services. Direct any questions about this collection to: FOIP Coordinator, Saddle Hills County, RR 1, Spirit River, Alberta, Canada, T0H 3G0, 1-888-864-3760.