



Lake Cowichan Fire Department Junior Firefighter Program Application



Personal Information	
Name	
Address	
Cell	Phone
Email	Birthdate

Do you have your parent's permission to be a Junior Firefighter?	Yes	No
Parent/Guardian Name		
Address		
Phone Number		

Emergency Contacts	
Name	Phone
Name	Phone

Medical Information	
Doctor	Phone
Medical conditions	
Allergies	
Do you take any medication?	Yes No
If yes, list the medication and condition it is for below:	
Medication	Medical Condition
Signature of Fire Chief	Date



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Background Information	
Have you ever been arrested, ticketed, fined etc.? (traffic tickets, misdemeanors etc.)	Yes No
If yes, please list the date(s) and description of charge(s) below:	

(a previous conviction may prevent you from becoming a member of the LCFD)

What interests you the most about becoming involved with the Lake Cowichan Fire Department?

Please list other activities, in detail, that you are involved in (Sports, Volunteer Work, Church, etc.):

Applicant Signature	Date
Parent Signature	Date

I acknowledge receipt of application and that the applicant received a copy of the Lake Cowichan Fire Department Junior Firefighter Program Guidelines.	
Signature of Fire Chief	Date



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Parental Consent

My son/daughter, _____ has my permission to be a Junior Firefighter with the Lake Cowichan Fire Department. I give my consent to allow _____ to be a Junior Firefighter and do not hold the Lake Cowichan Fire Department and First responders or the Town of Lake Cowichan responsible for any actions caused by my son/daughter that is not under the direction of an Officer.

Junior Firefighter Signature	Parent/Guardian Signature
Date	Date

Contract of Understanding

I and my son/daughter have read ALL of the Junior Firefighter Guidelines and understand the guidelines set up to outline the purpose of the Junior Firefighters. I and my son/daughter understand that Junior Firefighters serve as supporters of the Lake Cowichan Firefighters to learn the basics of Firefighting and to prepare to become a full member at the age of 18. I and my son/daughter understand that Junior Firefighters are to follow all instructions from members of the LCFD and that the general standard of conduct is to act in the manner of a professional. I and my son/daughter understand that he/she is expected to be courteous and respectful of other members (Junior and Regular) and to all citizens as they are representing the Lake Cowichan Fire Department. I and my son/daughter understand there is a "zero tolerance" policy regarding drug and alcohol use. I and my son/daughter understand that by signing this Contract of Understanding we are declaring that any violation of the guidelines is grounds for immediate dismissal. I and my son/daughter understand that any acts that violate the guidelines and that are illegal by provincial law will be referred to the RCMP.

Junior Firefighter Signature	Parent/Guardian Signature
Date	Date

Acknowledge Receipt of Guidelines

I acknowledge that I and my son/daughter have received a copy of the Lake Cowichan Fire Department Junior Firefighter Program Guidelines and have reviewed them prior to signing these documents.

Junior Firefighter Signature	Parent/Guardian Signature
Date	Date
Signature of Fire Chief	Date