



**Petrolia and North Enniskillen Fire Department:**  
**Membership Application**

Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Home Phone Number: \_\_\_\_\_  
Business/ Cell Number: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_  
Hours of Work: \_\_\_\_\_  
Employer Contact and Phone Number: \_\_\_\_\_  
Class of Drivers License: \_\_\_\_\_  
Physical  
Limitations: \_\_\_\_\_  
\_\_\_\_\_  
Firefighting  
Experience: \_\_\_\_\_  
\_\_\_\_\_  
Other Relevant Information (CPR, First Aid Training,  
etc.): \_\_\_\_\_  
\_\_\_\_\_

*By submitting this application, I hereby declare that I have read and understand all the conditions described in the Fire Department's "Recruiting Process" and submit my application to become a member of the Petrolia and North Enniskillen Fire Department.*

*I also understand, that if I am accepted as a probationary firefighting, that I may be released from the department's probationary process for failure to comply with the policy, at any time during the probationary process.*

*By submitting this application, I accept the above conditions and all other requirements for a probationary firefighter position within the Petrolia and North Enniskillen Fire Department.*

**PLEASE SUBMIT THIS APPLICATION FORM ALONG WITH YOUR RESUME AND A DRIVERS LICENSE ABSTRACT TO:**

[petrolia@petrolia.ca](mailto:petrolia@petrolia.ca)