

**NOVA SCOTIA FIREFIGHTERS SCHOOL COURSE APPLICATION**

Because the Nova Scotia Firefighters School provides intensive training in working skills, comparable to actual fire or rescue situations, and although this training is provided under controlled conditions, participants and their Department/Employer must understand that there is some risk of personal injury to participants. However, as an activity of the Nova Scotia Firefighters School, it must be clear that each participant has been informed of the risks implicit in the program and that his/her registration for the Course explicitly assumes those risks, in effect, holding the School, and/or its employees and instructors, harmless in the unlikely event of such injury.

**\*\*\*STUDENT DATE OF BIRTH (MANDATORY)** \_\_\_\_\_

MMDDYYYY

APPLICANTS NAME: \_\_\_\_\_ RANK: \_\_\_\_\_ YRS. SERVED \_\_\_\_\_

(PLEASE PRINT)

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

EMAIL: \_\_\_\_\_

HOME PHONE NUMBER \_\_\_\_\_ WORK PHONE NUMBER \_\_\_\_\_

PREVIOUS TRAINING  
ATTAINED: \_\_\_\_\_

NAME OF DEPT:/EMPLOYER  
\_\_\_\_\_

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

\_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

APPLYING FOR  
COURSE: \_\_\_\_\_ DATE: \_\_\_\_\_

**SEVERAL COURSES REQUIRE THAT YOU HAVE THE APPROPRIATE MANUAL.**

**DO YOU WISH TO PURCHASE THE MANUAL? YES \_\_\_\_\_ NO \_\_\_\_\_**

ACCOMODATIONS REQUIRED: YES \_\_\_\_\_ NO \_\_\_\_\_

COURSE FEE: INCLUDED \_\_\_\_\_ TO BE BILLED: \_\_\_\_\_ PO # \_\_\_\_\_

ALL STUDENTS MUST MEET THE PRE-REQUISITES OF THE COURSE THAT THEY ARE APPLYING FOR.

**ALL CLASSES WILL COMMENCE AT 7:45 A.M.**

HAS THE STUDENT HAD, OR ARE THEY PRESENTLY SUFFERING FROM ANY ILLNESS, DISEASE OR INJURY THAT COULD IMPAIR THEIR MENTAL OR PHYSICAL ACTIVITY?

YES: \_\_\_\_\_ NO: \_\_\_\_\_ EXPLAIN: \_\_\_\_\_

IS THE STUDENT ON ANY MEDICATION THAT COULD IMPAIR THEIR MENTAL OR PHYSICAL ABILITIES?

YES: \_\_\_\_\_ NO: \_\_\_\_\_ EXPLAIN: \_\_\_\_\_

WE, THE \_\_\_\_\_ (DEPT/EMPLOYER) THE UNDERSIGNED, HAVE BEEN INFORMED OF THE POSSIBLE RISKS OF INJURY ASSOCIATED WITH THE TRAINING PROGRAM OFFERED BY THE NOVA SCOTIA FIREFIGHTERS SCHOOL. WE ALSO HAVE BEEN INFORMED THAT THE DEPARTMENT/EMPLOYER MUST ASSUME ANY RISK OF INJURY INCIDENT TO THAT COURSE, AS A CONDITION OF PARTICIPATION. WE THEREFORE AGREE TO HOLD HARMLESS THE SCHOOL, ITS EMPLOYEES AND/OR INSTRUCTORS, IN THE EVENT OF INJURY RECEIVED DURING THAT COURSE.

\_\_\_\_\_  
SIGNATURE OF CHIEF/MANAGER

DATE: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF STUDENT

DATE: \_\_\_\_\_