Mentor/Instructor/Aspiring Firefighter Application Form





PERSONAL INFORMATION

WHAY?			
LAST NAME:	FIRST NAME:		
STREET ADDRESS:			
CITY, POSTAL CODE:			
PHONE NUMBER (home):	PHONE NUMBER (cell):		
EMAIL ADDRESS:			
DATE OF BIRTH:	T-SHIFT SIZE: HAT SIZE:		
FIRE SERVICE BACKGR	OUND		
HAVE YOUY COMPLETED YOUR NF	PA 1001/1002:		
ARE YOU AN ACTIVE OR RETIRED I	AFF MEMBER: IAFF LOCAL:		
HAVE YOU SERVED IN AN AUXILLIA	RY CAPACITY:		
WHAT DEPARTMENT DO/DID YOU V	VORK FOR:		
HOW MANY YEARS OF SERVICE DO	YOU HAVE: RANK ACHIEVED:		
DO YOU HOLD A VALID FIRST AID C	ERTIFICATE: LEVEL:		
WHAT DAYS ARE YOU AVAILABLE:	AUG 14: AUG 15: BOTH:		
WHAT ARE YOU APPLYING FOR:	INSTRUCTOR: MENTOR: ASPIRING FF:		
EMERGENCY CONTAC	T INFORMATION		
EMERGENCY CONTACT NAME:			
RELATIONSHIP TO YOU:			
PHONE NUMBER:			

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GENERAL INFORMATION

Have you taught or mentored at Camp Ignite in the past? If so what years and in what capacity?		
Are you interested in being on an email list to remain informed of future volunteer opportunities with Camp Ignite? Please cite any specific areas of interest you have regarding your involvement.		
Instructors, what stations are you interested in instructing?		
Have you ever had any health problems such as asthma, diabetes, heart trouble, seizures, bleeding disorder, fainting spells, or any other health condition that may restrict your ability to participate in camp activities? If yes, please explain (be specific):		
Do you any allergies? If so, how are they managed (ie: epi-pen, medication):		
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Do you have any food allergies or dietary restrictions (vegetarian, gluten free, lactose intolerant) that we should know: Please note that while we aim to serve high quality meals with attention to campers allergies, dietary requirements and food sensitivities, we unfortunately cannot accommodate dietary preferences.		
If you have anything else you would like to share please do so:		
What would you like to get out of your Camp Ignite experience? Please share:		
If you are an Aspiring Firefighter, are you actively applying currently? If so, what jurisdictions are of interest to you? Would you like to receive ongoing mentorship after camp?:		

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APPLICANT'S SIGNATURE		DATE	

THE DEADLINE FOR APPLICATION:

TO BE SUBMITTED BY JUNE 1, 2021

PLEASE EMAIL YOUR APPLICATION TO:

info@campignite.com