



MONTROSE FIRE BRIGADE
877 – 879 Mt DANDENONG RD MONTROSE VIC 3765
TEL: 9728 1999 FAX: 9728 8163

Application for Membership

*Please complete this questionnaire and return to the brigade personally
or by post Attention: Captain Rob Waters
For further information contact Kate Grasby 0447 174 604*

Family name

Given name

Preferred name

Date of birth

Age

Gender

Home address

Postal address

Business hours phone

Pager

After hours phone

Fax

Mobile phone

Email

Occupation

Date of application

Questionnaire

1) Please explain your understanding of CFA and it's role within the community.

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2) What made you decide to apply to join this Brigade?

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3) What is your availability for responding to calls during the :

Daytime

Night-time

Weekends.

4) Are you interested in other activities within the Brigade; such as

Public Relations: **Yes / No** Property Maintenance: **Yes / No**

Business Admin: **Yes / No** Equipment Maintenance: **Yes / No**

Community Education: **Yes / No**

5) How much training do you expect to receive and are you prepared to maintain the required training commitment? (Training is conducted on Sunday mornings and Tuesday evenings).

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6) Briefly explain to us your background and interests (e.g.: Schooling, work, hobbies etc.)

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7) What skills do you believe you hold that could benefit the Brigade?

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8) What are your thoughts on working in a disciplined and hazardous environment?

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9) What do you hope to achieve by joining CFA?

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10) Do you have any medical condition(s) that may effect you during firefighting activities? **Yes / No**

If yes, please describe:

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Signature:

Date:/...../.....