

Shire of Goomalling Bush Fire Service Membership Application Form



Please Complete Reverse Side

Please Note: Items marked with an asterix * are required fields

Surname*:	Given Name*:		
I			
Future Brigade Nomination:*	☐ Goomalling Central Bush Fire Brigade		
(Please select one)	(Please select one) ☐ Jennacubbine Bush Fire Brigade ☐ Konnongorring Bush Fire Brigade		
	☐ Goomalling District Farm Response Brigade		
	□ None − Please remove/end my current membership		
	(Please sign date and return from, no other details required)		
Rank/Role Nomination:*	☐ Fire Fighter		
(Please select one or more)	☐ Lieutenant (subject to availability/acceptance)		
	☐ Captain (subject to availability/acceptance)		
	Secretary (subject to availability/acceptance)		
	 □ Bush Fire Control Officer (subject to availability/acceptance) □ Auxiliary – Please provide role/task details: 		
	Trease provide role, task details.		
Personal Details Confirmation:			
(Please provide)			
Date of Birth:*			
Residential Address:*			
Postal Address:*			
i Ostal Addiess.			
Email Address:*			
Mobile Telephone:*			
·			
Home Telephone:			
Work Telephone			
Next of Kin Details:*			
(Please provide)			
Name:*			
Residential Address:*			
Telephone:*			
Relationship:*			

Acknowledgments*:			
(Please confirm each statement)	$\hfill \square$ I commit to completing the training requirements applicable to briga nominated.		
	☐ I commit to following Shire of Goomalling Bush Fire Operating Procedure noting that these are in development and may opt out of membership at any time. ☐ I understand the nomination is subject to brigade Captain and Shire acceptant.		
	\Box I provide permission for the details provided below to be provided to DFES use on systems which support the Shire in the administration and operation of Bush Fire Service.		
	$\hfill\Box$ I have no known medical conditions which prevent or impact my ability to carduties of my membership safely.		
Sign Off:			
Signature:		Date:	
Parent/Gua	rdian (if under 18 years of age)		
Signature:		Date:	
Captain:			
Signature:		Date:	

Further Information for Applicants:

• Following completion and submission of form to the Shire of Goomalling, you will be contacted by Community Emergency Manager via email with further information, including PPE issuing process and details of upcoming training.

Minimum Training Requirements:

• For compliance with Workplace Health and Safety legislation the Shire of Goomalling mandates the completion of the following training for members to be operational as below:

Goomalling Central BFB, Jennacubbine BFB, Konnongorring BFB

Completion of:

- Bushfire Safety Awareness (2-days) and;
- Firefighting Skills (2 Days)

These courses may be completed in any order.

Goomalling District Farm Response Brigade

Completion of:

- Rural Fire Awareness (1 Day)

Farm Response Brigade members are **not** permitted to crew or operate the appliances of the Bush Fire Brigades.

Members with pre-existing levels of DFES training may be considered for and offered a recognition of prior leaning process which may reduce the upfront training commitment, at the Shire's discretion.