



Huron Shores Fire Department

7 Bridge St., P.O. Box 460
Iron Bridge, Ontario Canada, P0R 1H0
Tel. (705) 843-2033
Fax. (705) 843-2035
Fire Chief: Gib Medve

Release From Liability Junior Fire Fighter Program

RE: _____
Name of Applicant

I, _____, being the custodial [] Parent [] Guardian
Name of Parent or Guardian

of _____ hereby grant my permission for him / her
Name of Applicant

to fully participate in the Huron Shores Fire Department Junior Fire Fighter Program. As such, I forever release and hold harmless all of the members of the Huron Shores Fire Department and the Municipality of Huron Shores for all or any injuries, or damages that may result in allowing _____ to become a
Name of Applicant

Junior Fire Fighter with the Huron Shores Fire Department and participating as such.

Signed this _____ day of _____ 20_____

at the _____ of _____

Signature of Parent or Guardian

Witness signature