The following forms, along with your payment, are required at the time of registration (SEE PAGE 2 FOR HOW TO REGISTER):
Registration Form  Release and Indemnity  PAR-Q  Physician’s Release

GENERAL INFORMATION
• Testing takes place at the Active Living Centre, University of Manitoba. Upon arrival, please identify yourself as a Firefighter applicant to the Active Living Centre Customer Service Desk staff.
• Tests are approximately 3 hours. For information on the specifics of the test, watch the video and read the course description here.
• Parking is free after 4:30 p.m. and on weekends, except where designated as “24-hour reserved”. We suggest parking in U lot. Click here for parking info.
• Locker room and shower facilities are available at the Active Living Centre. Day-use lockers are available; bring a lock.
• Arrive early and be ready (in your appropriate attire) 10 minutes prior to your test time.
• A valid Driver’s Licence/photo ID is required by the Fitness Consultants administering the test.

CLOTHING
• Bring the following items of clothing with you: shorts, two t-shirts with short sleeves (no sleeveless shirts for hygienic reasons), running shoes, and sweats. Your t-shirt will be wet from sweat after the treadmill test. You should change into a dry shirt and then put on sweats to keep warm during the 60-minute rest period.
• We have a good selection of firefighting boots, turnout gear and gloves, however getting an exact fit may not always be possible. You may bring your own gear if you choose. In order to get the best fit with our boots, bring several pairs of sport socks (thin and thick).

NUTRITION
• DO NOT exercise or drink alcoholic beverages at least 12 hours prior to your assessment. In addition, DO NOT eat, smoke or drink caffeinated beverages at least two hours prior to your test.
• You should bring a water bottle or sports drink (eg: Gatorade). You may want to eat a small snack (eg: banana or Power Bar) during the rest period between the treadmill test and the job-related tests.
• Be careful to practice in advance so that you know how much to eat and drink during 3+ hours of intermittent, extremely strenuous exercise. If you eat or drink too much, you may feel sick and do poorly. If you eat or drink too little you may not have energy or get dehydrated and do poorly.

REFUNDS
• The fee is good for one test only.
• Applicants must give 4 working days notice (between Monday to Friday) to have test date or time changed.
• If an applicant withdraws from a test 10 or more days before the testing date they may receive a refund less a $15 (+ GST) administration fee. If an applicant withdraws from a test less than 10 days before the testing date they may receive a credit for the value of the test less a $15 (+ GST) administration fee. Unless a medical certificate is presented, no refunds will be granted after the test date. Credits can be transferred among immediate family members. REFUND POLICY.
• If an applicant does not show up for the scheduled test time, the applicant forfeits the original test fee. If the applicant wants to re-register for the same recruitment, a new test fee must be paid.
• If an applicant cancels within 24 hours of the scheduled test time, the applicant forfeits 50% of the test fee and charged a $15 (+GST) admin fee.
• Applicants who register after the posted registration deadline will be charged a late fee.

OTHER
Before the test administrator can proceed with the test, your resting heart rate and blood pressure will be taken. This is to ensure that your heart rate is not equal to or above 100 beats per minute and your blood pressure is not equal to or above 160/90 mm Hg. These national standards have been set as a safety precaution. If you are equal to or above these levels, you will be asked to see your physician again to get additional permission to proceed with the test.

Registration Inquiries:
Customer Service Representatives
Active Living Centre
University of Manitoba, Winnipeg, MB R3T 2N2
Phone: (204) 474-6100
Toll Free: 1-800-432-1960 ext.6100

Test Specific Inquiries:
Coordinator of Fitness & Programs
Phone: (204) 474-6476
Toll Free: 1-800-432-1962 ext. 6476
firefighter.testing@umanitoba.ca
www.uofmactiveliving.ca
### REGISTRATION INFORMATION
- Canadian Forces Fire Marshall’s Firefighter Pre-Entry Fitness Evaluation fee is $325 +GST per test
- For details on refund, cancellation, and no-show policies, see page 1
- The completed Registration, Release & Indemnity, PAR-Q, and Physician’s Release forms, along with payment, are required at the time of registration (NO REGISTRATIONS OVER THE PHONE). Submit your forms in person (Active Living Center Customer Service Desk), by fax (204-474-7503), or electronically (scan into PDF or JPEG and email to firefighter.testing@umanitoba.ca). Payment options include VISA/MASTERCARD or cash/cheque/Interac (in person only).

### APPOINTMENT INFORMATION
I am registering for:  
- [ ] WINNIPEG FIRE PARAMEDIC SERVICE  
- [ ] BRANDON FIRE EMERGENCY SERVICES

1ST CHOICE: Date/Time ____________________________  |  2ND CHOICE: Date/Time ____________________________

[ ] Late Fee $50

### PAYMENT INFORMATION
**SELECT ONE:**  
- [ ] Visa  
- [ ] MasterCard  
- Cardholder’s Name: ____________________________
- Credit Card Number: ____________________________  
- Expiration Date: ____________

- [ ] Cash  
- [ ] Cheque  
- [ ] Interac
RELEASE AND INDEMNITY STATEMENT:

I understand that participation in programs/camps/membership services offered by the Faculty of Kinesiology and Recreation Management or the use of the Faculty’s sport and recreation facilities, even under the safest conditions, may be hazardous and that my participation (or that of my child(ren)) may expose Me (or my child(ren)) to elements of risk that may include loss of or damage to personal property or bodily injury such as, the possibility of internal injuries, fractures, concussions, sickness and even death. I expressly agree to accept and assume all of the associated risks.

IN CONSIDERATION of the University of Manitoba (the “University”) allowing Me or my child(ren) to participate in programs/camps/membership services offered by the Faculty of Kinesiology and Recreation Management or the use of the Faculty’s sport and recreation facilities, I on my own behalf and on behalf of my heirs, my spouse, my child(ren) executors, administrators and assigns RELEASE the University, its respective servants, agents or employees (collectively referred to as the “University”) from any liabilities, claims or actions of any nature whatsoever arising from or related to any and all injury (including death) to me or my child(ren) and/or loss or damage to personal property arising from, or in any way resulting from participation in programs/camps/membership services offered by the Faculty of Kinesiology and Recreation Management or the use of the Faculty’s sport and recreation facilities unless such injury and/or damage is caused by the SOLE NEGLIGENCE if the University or its employees or agents while acting in the Scope of their duties.

I FURTHER AGREE TO INDEMNIFY the University from any and all claims, demands, or causes of which are in any way connected with my and/or my child(ren)’s participation in programs/camps/membership services offered by the Faculty of Kinesiology and Recreation Management or the use of the Faculty’s sport and recreation facilities, unless such claims are based upon damages caused or alleged to be caused by the SOLE NEGLIGENCE if the University or its employees or agents while acting in the Scope of their duties.

I have had sufficient opportunity to read this entire document. I have read and understood it and I agree to be bound by its terms.

Date Name (print) Signature

Notice Regarding Collection, Use, and Disclosure of Personal Information and Personal Health Information by the University: Your personal information and personal health information is being collected under the authority of The University of Manitoba Act. The information you provide will be used by the University for the purpose of determining eligibility to complete the Canadian Forces Fire Marshall’s Firefighter Pre-Entry Fitness Evaluation, for registration (if eligible), and for communication (including communication with your emergency contact in case of an emergency). The results of your fitness test may be disclosed to the Winnipeg Fire Paramedic Service or the Brandon Fire Emergency Services for the purpose of determining whether or not you meet the standard physical requirements for your occupation. Your personal information and personal health information will not be used or disclosed for other purposes, unless permitted by The Personal Health Information Act (PHIA) or The Freedom of Information and Protection of Privacy Act (FIPPA). If you have any questions about the collection of your personal information or personal health information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.

U OF M USE ONLY

FORMS: Date Received ____________ Time Received ____________ Data Entered by ____________

☐ Registration ☐ Release & Indemnity ☐ PAR-Q

PAYMENT Amount $ ____________ Date ____________ Processed by ____________

TEST DATE ____________ TEST TIME ____________ Phone Confirmation By ____________ Date ____________
Common sense is your best guide when you answer these questions. Please read the questions carefully, and answer each one honestly: Circle YES or NO

1. Has your doctor ever said that you have a heart condition and that you should only do physical activity recommended by a doctor?  
   YES  NO

2. Do you feel pain in your chest when you do physical activity?  
   YES  NO

3. In the past month, have you had chest pain when you were not doing physical activity?  
   YES  NO

4. Do you lose your balance because of dizziness or do you ever lose consciousness?  
   YES  NO

5. Do you have a bone or joint problem that could be made worse by a change in your physical activity?  
   YES  NO

6. Is your doctor currently prescribing drugs (for example, water pills) for your blood pressure or heart condition?  
   YES  NO

7. Do you know of any other reason why you should not do physical activity?  
   YES  NO
GENERAL DETAILS
The CFFM FPFE is designed so that an applicant can demonstrate that he/she has the minimum ability to perform the physical duties associated with fire paramedic services.

Standards for males and females are the same because the physical duties are the same regardless of gender.

Each test requires a maximal effort. All of the tests are completed while wearing firefighting personal protective equipment (PPE: helmet, flashhood, gloves, pants, boots, jacket and self-contained breathing apparatus – tank only) that weighs approximately 50 pounds. For safety during the treadmill test, running shoes are substituted for firefighting boots. After completing the treadmill test, applicants rest for 60 minutes before starting an orientation to the job-related performance tests. The orientation to the job related tests consists of a “walk-through” session to practice each of the tasks. This will take approximately 30 minutes and will provide a suitable warm-up for the demanding tests that follow. Each test is followed by a rest period of 3 minutes for recovery and hydration. Applicants are not permitted to leave the testing area or remove the any PPE during the rest periods.

The tests are administered by the Recreations Services at the University of Manitoba, and are not medically supervised. The test procedures are described briefly below:

TEST DETAILS

1. **Aerobic Endurance:** Aerobic fitness will be measured during a progressive exercise test to near exhaustion on a treadmill. After a standardized 5-minute warm-up, applicants walk at 3.5 mph and 10% grade for 8 minutes. In order to pass the aerobic fitness standard, applicants must complete the 8-min stage at 3.5 mph and 10% grade.

2. **Charged Hose Advance Test:** This test assesses lower body strength and power and must be completed safely (walking) in less than 32 sec. Three 50 foot lengths of charged (full of water) hose (1.5 inch in diameter) are attached to each other. Applicants place the nozzle over a shoulder and walk 125 feet, dragging the hose.

3. **High Volume Hose Pull Test:** This test assesses upper body strength, power, and must be completed safely in less than 102 sec. A bundle of hose weighing approximately 123 pounds is pulled a distance of 50 feet over a smooth concrete floor using a rope. During the test, applicants must stand still and pull the hose bundle towards them using 5/8 inch rope. This is repeated 3 times.

4. **Forcible Entry Simulation Test:** This test assesses muscle strength, power and endurance, particularly in the upper body and must be completed safely in less than 45 sec. Applicants use an 8 pound “dead blow” sledge hammer to move a forcible entry machine against 1200 psi as rapidly as possible.

5. **Victim Drag Test:** This test assesses muscle strength and endurance and must be completed safely in less than 49 sec. Applicants drag a mannequin weighing 150 pounds a total distance of 100 feet; walking backwards for 50 feet, turning around a traffic cone and returning to the start line as quickly as possible.

6. **Ladder Climb Test:** This test assesses muscle strength, endurance, and anaerobic capacity and must be completed safely in less than 108 sec. Applicants climb a 24 foot ladder to the 10th rung and return to the floor as quickly as possible; repeating five times.

7. **Equipment Carry/Vehicle Extrication Test:** This test assesses the strength and endurance required to lift, carry and use heavy tools in rescue situations and must be completed safely in less than 270 sec. Applicants carry small (40 pound) and large (80 pound) vehicle extraction tools (‘Jaws of Life’) a total distance of 100 feet. The 40 pound tool will be lifted and held in specific positions that simulate the work required to remove a vehicle door.
PHYSICIAN’S RELEASE FORM
CANADIAN FORCES FIRE MARSHALL’S FIREFIGHTER PRE-ENTRY FITNESS EVALUATION
Medical Clearance For Testing

Applicant Name (please print clearly):

Is this individual taking any medication that could affect normal physiological responses to exercise? (Please circle)  NO  YES
If yes, please explain: _____________________________________________________________

Is there any medical reason that this individual should not undertake very strenuous exercise? (Please circle)  NO  YES
If yes, please explain: _____________________________________________________________

I certify that this applicant has been given a medical examination and is medically fit to undertake the Canadian Forces Fire Marshall’s Firefighter Pre-Entry Fitness Evaluation as described.

Physician’s Name (Please Print): __________________________________________________

Clinic Address: ___________________________  Date: ___________________________

Telephone: ___________________________

Physician’s Signature: ___________________________

Physician’s Stamp

Notice Regarding Collection, Use, and Disclosure of Personal Health Information by the University: This personal health information is being collected under the authority of The University of Manitoba Act. Where you have provided personal health information about a third party, your signature shall be deemed to include a representation on your part that you have the consent of the third party to provide their personal health information to the University of Manitoba. The information you provide will be used by the University for the purposes of determining the applicant’s eligibility to complete the Canadian Forces Fire Marshall’s Firefighter Pre-Entry Fitness Evaluation. This personal health information will not be used or disclosed for other purposes, unless permitted by The Personal Health Information Act (PHIA). If you have any questions about the collection of this personal health information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.