



STAYING ALIVE SUCCESS STORY

Do you have an interesting story or a method of getting fire safety across to the people in your area? Tell us about your experiences and how things work for you. By working together we can make fire safety and awareness a vital part of everyday life!

When sending in your Success Story, please be sure to include a picture (of you or the crest from your fire department) and the following information:

Story submitted by: _____

School/Organization: _____

Address: _____

Telephone Number: _____

Fax Number: _____

Name and age of individual who took action: _____

Incident Date: _____

Location of Incident: _____

How did the individual learn about the Staying Alive Program?

Attach a detailed account of the incident.

Return completed form to:
info@stayingalive.ca