



WASHINGTON COUNTY SEARCH AND RESCUE

Membership Application

APPLICANT INFORMATION		
First Name:	Last Name:	
Street Address:		
City:	State:	Zip Code:
Phone:	Cell:	Email:
Social Security Number:		Date of Birth (m/d/y):
Driver's License State:	Driver's License Number:	
Any driving infractions in the past 5 years? YES <input type="checkbox"/> NO <input type="checkbox"/>	If Yes, explain:	
Being a SAR volunteer requires commitment to attend training and call outs. Are you able to make a minimum 3-year time commitment? YES <input type="checkbox"/> NO <input type="checkbox"/>	If No, explain:	
Do you have any medical conditions that restrict or limit your ability or that search managers or fellow searchers should be aware of? (e.g. back problems, diabetes, allergies, heart condition) YES <input type="checkbox"/> NO <input type="checkbox"/>	If Yes, explain:	
Do you consent to the completion of a background Criminal Records Check and to having it reviewed by the WCSAR Membership Committee? YES <input type="checkbox"/> NO <input type="checkbox"/>		
EXPERIENCE		
List any experience you have in Emergency Services (SAR, Police, Fire, Ambulance, First Aid, Coast Guard, Ski Patrol):		
List any employment related wilderness experience:		
List any first aid qualifications and expiry dates:		
List any other outdoors related qualifications:		
Describe activities you engage in to maintain your fitness:		
Do you have post-secondary, vocational or trade training? If Yes, in what field of study?		
Beyond the above, please briefly describe any other skills/experience you feel you have to contribute to the WCSAR:		
Why do you want to volunteer for WCSAR?		



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AVAILABILITY		
Current employer:		
Occupation:	How long?	
Normal Days and Hours of Work:		
Are you able to leave work on short notice for SAR calls?		
Position:		
EMERGENCY CONTACT		
Name:		
Address:		Phone:
City:	State:	Zip Code:
Relationship:		
REFERENCES		
Reference 1:	Relationship:	Phone:
Reference 2:	Relationship:	Phone:

APPLICANT DECLARATION

The Washington County Search and Rescue appreciates the time you have taken to complete this application. Please feel free to attach a resume or additional comments.

A current driver's will be required for all successful candidates.

All successful applicants will be required to undergo a criminal record and background.

By signing this application, I hereby acknowledge and understand that there are inherent risks associated with search and rescue activities including training, and that these activities may occur during adverse weather conditions, at night, and in remote wilderness terrain. I fully assume these risks. I also understand that participation in all search and rescue activities and tasks is strictly voluntary and that I may decline to participate or continue to participate in any activity or task at any time at my sole discretion.

I understand the value of the time that will be taken by WCSAR team members to train me. I am declaring as a prospective new member I will adhere to the Washington County Search & Rescue bylaws including attendance and training requirements. All statements made in this application are true. I understand that false or misleading information provided in my application or during the interview process may lead to my disqualification for continued team involvement.

Signature of applicant:	Date:
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Please use this page if you require more space to complete your answers