## **Jefferson Search & Rescue**

Volunteer Application Form

Name *	
First Name	Last Name
Phone Number	*
Area Code	Phone Number
Email *	
Address *	
Street Address	
Street Address Line 2	
City	State
Postal / Zip Code	
Are you 18 year	rs of age or older? *
YES NO	
Will your curren	nt physical condition allow you to participate in demanding training and rescue llenging terrain and conditions? *
YES	
NO	
Do you understa	and that all applicants are required to complete a criminal background check? *

JSAR holds monthly business/training meetings on the second Thursday of every month at 1900. Will you be able to attend those meetings? *		
YES NO		
JSAR typically holds field training exercises on the weekend following the monthly business/training meeting (usually on Saturday). Will you be able to attend those trainings? *  YES  NO		
Describe your motivation for joining JSAR: *		
Provide minimum two references (name, email, cell phone number, and a brief description of your relationship): *		
List current or previous professional or volunteer emergency response experience (be as detailed as possible): *		
List medical training and certifications, including expiration dates: *		

List any other relevant certifications:	
Specify your experience level with climbing	, skiing, backpacking, hiking, rafting, and kayaking: *
Please describe some of the experiences thoceans, etc.	nat have challenged you in the mountains, rivers,
Specify any current obligations with other v	olunteer organizations:
Please indicate if you own the following kit:	*
Climbing harness	Climbing helmet
Backpacking/climbing pack Snowshoes	AT ski or snowboard setup Ice axe
Crampons	Crampon-compatible boots
Avalanche transceiver/probe/shovel	Sleeping bag/thermal pad
Compass	Drysuit or fullsuit

Packraft

Type III or Type V PFD