



## NORTH SHORE SEARCH AND RESCUE APPLICATION FOR MEMBERSHIP

*For the Executives of North Shore Search and Rescue Inc. in order to screen Applicants for membership.*

Last Name:		First Name:		Initial	
Address:					
Email Address:					
Social Insurance Number: (optional)					
Date of Birth:		Height:		Weight:	
Sex:            M    F					
Home Phone:			Business Phone:		
Cellular					
Employer:					
Emergency Contact				Phone No.:	
Assets or Qualifications you can bring to the team, ie. scuba, map & compass, cooking, fundraising, etc.					
<b>CERTIFICATIONS:</b>					
CPR		yes	no	Date of Certification/Recertification:	
First Aid		yes	no	Date of Certification/Recertification:	

**What team(s) are you interested in (circle those which apply):**

- |                |                |           |
|----------------|----------------|-----------|
| Ground Search  | Fund Raising   | First Aid |
| Communications | Transportation | Logistics |

**I certify that all information is accurate and true to the best of my knowledge**

DATE:	SIGNATURE:
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If you would like to attach a resume, please feel free.

**For more information call (705) 869-8587**

A completed Police Criminal Records Check including the vulnerable sector is a requirement of membership and is the responsibility of the applicant; it can be mailed with this application to:

North Shore Search and Rescue  
385 Ricci Dr., Espanola, ON, P5E 1G4

or e-mail to

[join@northshoresearchandrescue.ca](mailto:join@northshoresearchandrescue.ca)