



Pictou County Volunteer Ground Search And Rescue
PO Box 1144, Trenton, NS B0K 1X1

This is a confidential document.

Before you can be accepted for membership you will have to provide a current Police Criminal Records Check.

First and Middle name(s): _____

Family Name: _____

Maiden Name (if applicable): _____

Date of Birth: Month _____ Date _____ Year _____

Address: Street _____

P.O. Box or R.R.# _____

Town _____

Postal Code _____

Home Phone: _____

Cellular Phone: _____ ☐ accepts text

Work Phone: _____ ext. _____ **Note:** for search use only so please DO NOT FILL IN unless you wish to be called there for a search

E-mail address: _____

Medical

Are you in good health? Yes/No _____

Do you have any medical conditions that would limit your activities or require you to take medication on a regular basis? _____

Training & Skills

Do you have a current (valid) CPR course? _____ Exp. Date: _____

Level: _____

Do you have a current (valid) First Aid course? _____ Exp. Date: _____

Level: _____

Do you have formal Map and Compass Training? _____

Special Skills or Interests: _____

Are you interested in a Non-Searcher role (Business only) (Check all that may apply)* Yes No

- ☐ Secretary
- ☐ Treasurer
- ☐ Fundraising
- ☐ IT Position
- ☐ Director

Searcher Role Interests (tick any of interest)*

- | | |
|--|---|
| <input type="checkbox"/> Searcher | <input type="checkbox"/> Radio Operator |
| <input type="checkbox"/> Team Leader | <input type="checkbox"/> Driver |
| <input type="checkbox"/> Logistics Section Chief | <input type="checkbox"/> Hug-A-Tree |
| <input type="checkbox"/> Safety Officer | <input type="checkbox"/> No particular (if you do not know) |

*** All would have to meet PCVGSAR requirements**

Emergency Contact: the person we are to contact if you become injured or ill

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____

Personal References: (not related)

Name: _____

Relationship: _____

Phone Number: _____

Name: _____

Relationship: _____

Phone Number: _____

Name: _____

Relationship: _____

Phone Number: _____

Consent for Release of Confidential Information

I _____ do hereby make application for membership in Pictou County Volunteer Ground Search And Rescue. I understand that the persons named above as personal references may be contacted and that their responses will be kept confidential.

I further consent to have disclosed to the Pictou County Volunteer Ground Search And Rescue or any authorized members of the said Pictou County Volunteer Ground Search And Rescue my criminal record or record of any criminal charges pending against me. The said Pictou County Volunteer Ground Search And Rescue may request this information from me or any Law Enforcement Agency at any time and let this be their good and sufficient authorization for doing so.

I also understand that following approval of my application a probationary period will follow. I further agree to conform to the bylaws of the society as set out in the constitution of the society now and as they may be amended in the future.

Date: _____

This application is the property of Pictou County Volunteer Ground Search And Rescue.