



## Summit to Sound Search and Rescue: Membership Application

This is an application for membership in Summit to Sound Search and Rescue, a private not for profit organization whose mission is to provide professional level search and rescue services through the Whatcom County Sheriff's Office. To achieve this goal, we:

- Train to provide professional level search and rescue service
- Educate to maximize safety of individuals participating in outdoor activities
- Respond to complement other county and state rescue services

**Please write LEGIBLY, so we can get accurate info into the call system**

Date of application: \_\_\_\_\_

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (MI) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Auto Ins. Co. \_\_\_\_\_

Medical Ins. Co. \_\_\_\_\_ Ham Lic \_\_\_\_\_

If you have a current Emergency Worker Card issued by Whatcom County, what is the card number \_\_\_\_\_ and expiration date: \_\_\_/\_\_\_/\_\_\_; if not, please complete the DEM card application.

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Driver's License Number \_\_\_\_\_

Phone Numbers: Circle #'s wish used for callout

Type = (home, cell, work, other):

1: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ type: \_\_\_\_\_

2: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ type: \_\_\_\_\_

3: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ type: \_\_\_\_\_

Email address(s) where you want to receive electronic correspondence.

(1) \_\_\_\_\_

(2) \_\_\_\_\_

### Areas of Interest (check all that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> Ground SAR (Search on foot)           | <input type="checkbox"/> Swiftwater (Search/recover in water)  |
| <input type="checkbox"/> Search Dog Handling (Search with dog) | <input type="checkbox"/> Communications (Run radio/keep log)   |
| <input type="checkbox"/> ATVs (Search/transport by ATV)        | <input type="checkbox"/> Finance/Administration (Keep records) |
| <input type="checkbox"/> EMS (State EMT certified)             | <input type="checkbox"/> Operations Section (Manage a mission) |
| <input type="checkbox"/> Equine (Search by Horseback)          | <input type="checkbox"/> Other: _____                          |

**Please provide a letter detailing why you would like to join the organization and how you think you could contribute to the organization's mission.**

I have read the STS bylaws and polices at [www.summittosound.org/about.html](http://www.summittosound.org/about.html)

Signature \_\_\_\_\_

Date \_\_\_\_\_

#### FOR OFFICIAL USE ONLY

#### Board of Directors

If denied, explanation: \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_ Chair: \_\_\_\_\_