



Custer County Search & Rescue (CCSAR)
 710 Rosita Avenue, P.O. Box 1092, Westcliffe, CO 81252
Application for Membership

Name		Date of Birth	
Address		Driver's License #	
		State Issued	
		Exp. Date	
Cell # & Service Provider		Emergency Contact (EC)	
Home #		EC Relationship	
Work #		EC Contact #	
Email			

Please visit our website, <http://custersar.org/new-members>, before completing the remainder of your application to review our training information, policies and procedures, and past mission information. **Date Visited:** _____

Please provide a summary of why you're interested in joining CCSAR
How did you hear about CCSAR?
If you know any team members, who are they?

Personal Skills (Please list training and attach current applicable certifications)	
Training/Certifications (e.g. CPR, medical, mountaineering, etc.)	
Other qualifications & experiences	
Equipment & Type – experience/own (e.g. GPS, climbing gear, snow gear, etc.)	

Medical information which may impact your safety or the safety of others while performing SAR activities	
Physical Condition, Limitations, Medications & Allergies	

Have you ever been convicted of a felony?	Yes	No
Do you have an active Restraining Order against you?	Yes	No

As an applicant to Custer County Search and Rescue, I authorize the Custer County Sheriff's Department to conduct a personal background check. Falsification of application information is grounds for membership denial or dismissal.

Applicant Signature		Date	
Sheriff's Office (S.O.) Comments	<i>Attach separate sheet if comments are confidential or sensitive in nature</i>		
Signature Approval of S.O. Rep.		Date	