

PENNSYLVANIA WATER RESCUE

APPLICATION FOR MEMBERSHIP

Personal Information

(Please Print Clearly)

Name _____ Application Date _____

Address _____

City _____ State _____ Zip _____

Phone No. _____ Cell No. _____ Birth Date ____/____/____

Occupation _____ Place of Employment _____

Work Phone No. _____ Shift or hours of employment _____

Social Security No. _____ Driver's License No. _____

What days and hours are you available? _____

May we call you at work for emergency services? _____

Who may we contact in case of an emergency? _____ Phone _____

Diving History

List your Certifying Agency, level and year certified: _____

List any specialties: _____

List any areas you may feel uncomfortable diving in (River, Depth, Low Visibility, Ice, etc.) _____

List all equipment you own: _____

NOTE: The Board of Directors will request to view your log book

Ground Support

Explain the extent of your First Aid training, if any: _____

Have you completed any rescue courses? If so, please explain: _____

Do you have any boat handling experience? If yes, state size and type of boat: _____

Do you have any rope handling or knot tying experience? _____

Are you, or have you ever been, a member of a fire or ambulance unit? _____

Reason for leaving above unit (if you are no longer a member): _____

List any medical or physical limitations, current or past: _____

Name any organizations you belong to: _____

TO APPLICANT: READ THIS INTRODUCTION CAREFULLY BEFORE ANSWERING ANY QUESTION IN THIS BLOCKED-OFF AREA: The civil rights act of 1964 prohibits discrimination in employment practice because of race, color, religion, sex, or national origin. P.L. 90-202 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 65 years of age. The laws of some states also prohibit some of all of the above types of discriminations, as well as some additional types, such as discrimination against the physically handicapped.

Are you older than eighteen? _____

Sex: M _____ F _____

Marital Status: _____

Are you a Citizen of the USA? _____

Have you ever been convicted of a crime in the past ten years? _____

Offenses: _____ If yes, describe in full: _____

Personal References
(Excluding **Pennsylvania Water Rescue** members and relatives)

Name	Address	Phone
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1.

2.

3.

I certify that all the information given is accurate to the best of my knowledge.

Signature _____ Date _____

I hereby give permission for any or all authorized officer(s) of the Pennsylvania Water Rescue to contact any law enforcement agency that he or she sees fit in order to verify the above information or to further check into any criminal record.

Signature

Date