



## Chelan County Volunteer Search & Rescue Volunteer Application

Thank you for your interest in volunteering with Chelan County Volunteer Search & Rescue. All sections must be completed before we can process your application. Upon completion, submit your application to: [ccvsar.org/join/](http://ccvsar.org/join/) or mail to: **CCVSAR, PO Box 196, Wenatchee, WA 98807**. Please allow up to two weeks for review. For questions or assistance, please email: [info@ccvsar.org](mailto:info@ccvsar.org) or call (509) 433-7171.

### Minimum Requirements:

- 18 years of age and older
- Clear, unrestricted driver's license (may be waived for ESAR & Adcom position)

### Personal Details:

First Name, Last Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Employment:

Occupation: \_\_\_\_\_

Current Employer: \_\_\_\_\_

Years Employed: \_\_\_\_\_

Work Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Work Contact (phone & email): \_\_\_\_\_

### Skills and Interests:

Have you ever volunteered with a Search & Rescue or a similar organization before?

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**Do you have any relevant certifications or licenses (EMT, WFR, Radio Operator, etc)?**

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**Do you have any particular skills or qualities that you could use in our Search & Rescue group?**

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**Why do you want to volunteer now? What has motivated you to get in touch with us?**

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**Is there anything else you would like to tell us about yourself to assist in processing this application?**

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**What kind of voluntary work interests you?**

- Field Search & Rescue
- Base Support
- Fundraising & Grants
- Equipment Maintenance
- Website & Application Development
- Training
- Administration

**Which of our Units are you interested in?**

- Ground
- ORV (4x4 Motorcycle / ATV / Snowmobile)
- Administration & Communications (AdComm)
- Drone

**In general when are you available for voluntary work?**

- Flexible
- Morning
- Afternoon
- Evening

**Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How did you hear about us?**

- Information / Outreach meeting / PR Event
- CCVSAR Website
- CCVSAR Facebook
- Media: Radio / Television / Newspaper
- Word of Mouth
- Leaflet / Poster
- Other \_\_\_\_\_

**Are you fluent in any foreign language?**

- Yes
- No

**If so, which:** \_\_\_\_\_

**References:**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Contact (phone & email): \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Contact (phone & email): \_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Contact (phone & email): \_\_\_\_\_

**Waiver:**

I understand that by signing this application, I will be required to commit time to this program, as well as to achieve and maintain the training certification level for my role in the organization.

I am giving authorization to the Chelan County Volunteer Search & Rescue to make inquiries into my background, employment history, school record, military history, driving records, and general reputation.

I understand that Certification as an Emergency Worker by our served agencies is required to be a member of CCVSAR.

I hereby certify that the entries made by me on this application are true, complete, and correct to the best of my knowledge and belief. Further, I hereby release you, your organization or others from any liability or damage which may or could result from furnishing the information requested above or from any subsequent use of such information in determining my qualifications as a volunteer within Chelan County Volunteer Search & Rescue.

Upon acceptance as a member I authorize CCVSAR to use the email address and cell phone provided for general club communication and mission notification.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_