

Willamette Pass Ski & Bicycle Patrol

Membership Application

Check one on each line:

Applying for: Alpine ski ____ Alpine board ____ Bicycle ____ Auxiliary ____
New Patroller ____ Transfer ____

Volunteer (weekends, weekday aux & bike) _____

Paid (Weekday skiers/boarders) _____ Either _____

1. Name _____ Age _____
2. Home Address (include city and zip): _____

3. Telephone -- Daytime _____ Evening _____
4. E-mail _____
5. Occupation/Employer _____
6. Please describe first aid, medical and CPR training you have had, and your current certification level, if any: _____

7. For prospective skiing/boarding patrollers, outline skiing experience (i.e. alpine, Nordic, years, ability) _____

8. Patrol related training, skills and experience (please explain):
Search and Rescue _____
Mountaineering _____
Winter camping _____
9. Please describe other vocational or recreational skills interests or experiences you believe would be of benefit to the Patrol: _____

10. With what other organizations are you actively involved? _____

Do you feel your other commitments might compromise your ability to participate fully in patrol training from time to time? Yes ____ No ____ If yes, explain _____

11. Major Medical insurance carrier (mandatory for all members): _____

12. Why do you want to join the Willamette Pass Ski & Bike Patrol? _____

13. Please provide any other information you believe supports your application to become a patroller: _____

14. References:

Name _____ Position _____ Phone _____

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15. Family members living in your home with you _____

16. NSP data (transfers only):

Most recent registration: Division _____ Patrol _____

Membership number _____

First year NSP _____ Number of years patrolling _____ Senior (yr) _____

Certified # _____ (yr) _____ National appointment # _____ (yr) _____

Basic Avalanche # _____ (yr) _____ Advanced Avalanche # _____ (yr) _____

Basic Mountaineering # _____ (yr) _____ Adv Mount. # _____ (yr) _____

Signature: _____ Date _____

Birth date: _____