

**APPLICATION TO JOIN SEARCH AND RESCUE
AVALANCHE DOGS**



Name:

Address:

E-mail

Phone Number:

Mobile Number:

Do you intend to train as a search dog handler? Yes / No

If intending to train as an avalanche search dog handler what will be your winter address?

If intending to train as a search dog handler please give a short bio of your SAR / Alpine and dog training experience:

If you are already a member of SAR or Mountain Rescue then which group do you belong to?

Do you already have a dog? Yes No

If Yes then what is the dog's name and age:

Potential members need to be nominated by two current financial members of Search and Rescue Avalanche Dogs.

Member Name: _____

Signed: _____

Member Name: _____

Signed: _____

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I understand that by submitting this application that I agree to abide by the Rules of Search and Rescue Avalanche Dogs.

I have read, signed and agree to comply with the Search and Rescue Avalanche Dogs Code of Conduct. I understand that should I breach the Code of Conduct; my membership could be terminated.

I understand that the Search and Rescue Avalanche Dogs Committee reviews all applications for membership and I agree to be bound their decision regarding my application for membership.

Signed _____

Date: _____