



ESCAMBIA
SEARCH
AND
RESCUE Inc

MEMBERSHIP APPLICATION

DATE

9530 NIMS LANE
PENSACOLA, FLORIDA 32534
(850) 474-1644

The information requested in the ESAR application is of a personal nature and is to be provided voluntarily. However, failure to provide the information requested in this application may result in an inability to process application and deny membership to ESAR. **PLEASE PRINT**

NAME _____ DOB _____ AGE _____
LAST FIRST MIDDLE

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE: Home _____ Cell _____ Other _____

E-MAIL: Primary _____ Secondary _____

CAN YOU BE CALLED AT WORK? ☐ YES ☐ NO IF YES, WORK PHONE

☐ MALE ☐ FEMALE HEIGHT _____ WEIGHT _____ EYES _____ HAIR _____

DRIVERS LICENSE NO _____ STATE _____ CLASS _____

CHECK ANY OF THE FOLLOWING EQUIPMENT YOU OWN

☐ FOUR WHEEL DRIVE VEHICLE ☐ P/U TRUCK ☐ ATV ☐ BOAT ☐ JET SKI ☐ OTHER

MEDICAL TRAINING

☐ FIRST AID ☐ CPR ☐ 1ST RESPONDER ☐ EMT ☐ PARAMEDIC ☐ NURSE
☐ VET TECH ☐ OTHER

EXPERIENCE/SKILL THAT MIGHT BE AN ASSET

EMERGENCY CONTACT INFORMATION

NAME _____ RELATIONSHIP _____
LAST FIRST

PHONE: Home _____ Cell _____

ADDRESS _____

COMMAND PREFERENCE

☐ MARINE ☐ LAND
☐ K9 ☐ DIVE
☐ COMMS ☐ SUPPORT
☐ FAMILY SRVS

A BACKGROUND CHECK IS REQUIRED. HAVE YOU BEEN ARRESTED? ☐ YES ☐ NO ☐ CONVICTED

HAVE YOU EVER BEEN HOSPITALIZED FOR ANY PSYCHIATRIC REASON? ☐ YES ☐ NO

IF YES ON ANY OF THE ABOVE QUESTIONS PLEASE EXPLAIN ON BACK OF APPLICATION.

I APPLY FOR MEMBERSHIP IN ESCAMBIA SEARCH AND RESCUE AT MY OWN INITIATIVE, RISK AND RESPONSIBILITY. IF I AM ACCEPTED I DO HEREBY DISCHARGE THIS CORPORATION, IT'S OFFICERS, AGENTS, EMPLOYEES AND OTHER MEMBERS FROM ANY AND ALL CLAIMS ON MY ACCOUNT OF MY DEATH, INJURY TO ME, INJURY TO MY DOG, OR LOSS OR DAMAGE TO MY EQUIPMENT, WHICH MAY OCCUR DURING ANY MISSION, TRAINING, WORK DETAIL, MEETING OR MY INVOLVEMENT WITH THIS UNIT AND IT'S PROPERTY, OFFICIALLY OR UNOFFICIALLY. I ALSO AGREE TO IMMEDIATELY PURCHASE THE PRESCRIBED MISSION UNIFORM AND TO ABIDE BY THE BY-LAWS, SOP'S, AND MEMBERS' HANDBOOK. I AGREE TO A BACKGROUND CHECK PERFORMED ON ME FOR A NOMINAL FEE. I AM VOLUNTEERING MY TIME AND SKILLS AS A MEMBER OF THE ESCAMBIA SEARCH AND RESCUE TEAM, NOT JUST AS A MEMBER OF THE COMMAND TO WHICH I AM ASSIGNED. I CERTIFY THAT I HAVE READ, UNDERSTAND AND AGREE TO THE ABOVE STATEMENT BY PLACEMENT OF MY SIGNATURE HEREON.

SIGNATURE

WITNESS/PARENT (IF MEMBER UNDER 18)

DATE

OFFICE USE ONLY

☐ ACCEPTED

☐ DENIED

COMMAND _____

COMMANDER _____

ASST DIR _____

DIRECTOR _____