

**FOOTHILLS SEARCH & RESCUE SOCIETY  
CONTRACT – AGREEMENT**

The Executive of the Foothills Search & Rescue Society appreciates the commitment that its members are making to the community. We recognize the need for the team to be a cohesive and effective group and make the following commitment to each member.

- To provide a meeting place for society activities.
- To facilitate training and informational lectures.
- To establish and maintain a resource library and supply of team equipment.
- To provide the necessary equipment for training.
- To establish an effective organizational system for search and rescue situations.
- To establish an effective communication system between members.
- To provide recreation for the members and afford opportunity for social activities.

In turn Foothills Search and Rescue Society expect that its members make the following commitment to the organization and the people of the community to be served.

- Complete and pass Search and Rescue Fundamentals or Search and Rescue Basics (ERI).
- Hold a valid and current Standard First Aid / CPR (B) certificate.
- Participate in 2 searches, real or mock (or a combination) in a calendar year.
- Participate in a minimum of 50% of the monthly meetings and scheduled monthly training (consisting of a minimum of 3 trainings) in a calendar year.
- Pay the annual dues on time.

\_\_\_\_\_  
Signature of Applicant                      Date

\_\_\_\_\_  
Treasurer Signature – Dues                      Date Paid

**FOOTHILLS SEARCH & RESCUE SOCIETY  
CONTRACT – AGREEMENT**

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

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

City / Town: \_\_\_\_\_

Postal Code: \_\_\_\_\_

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

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

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

E-Mail: \_\_\_\_\_

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

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

\*\*\*\*\*

**Applicant Profile**

Date of Birth: \_\_\_\_\_ M/F: \_\_\_\_\_

Alberta Health Care No: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

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

**Previous Related Training Experience**

(First-aid, rescue, survival, navigation, communication, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reasons for Joining FSAR**

(Personal objective, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Limiting Health Concerns**

(Allergies, asthma, diabetes, heart condition, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_