



## UNITED SEARCH AND RESCUE MEMBERSHIP APPLICATION

2294 Nostrand Ave. Suite 1005  
Brooklyn, NY 11210

Fax: (212) 365-0308  
Email: director@unitedsar.org

United Search And Rescue requires this form to be completely filled out and verified prior to acceptance.  
Information listed on this form may be forwarded to Law Enforcement officials if applicable.

### Name: "Please List Full Legal Name"

Last First Middle

Nickname \_\_\_\_\_

Attach Photo ID

This name is what will be on your membership card. First name only.

### Address:

Street City State Zip Code

Country \_\_\_\_\_

### Please include:

Mailing and physical address, a copy of your car registration(for the parking plaque)

Date of Birth: Month / Day / Year

Phone-Daytime: (\_\_\_\_)-\_\_\_\_ - \_\_\_\_ Phone-Evening: (\_\_\_\_)-\_\_\_\_ - \_\_\_\_

Phone-Cell: (\_\_\_\_)-\_\_\_\_ - \_\_\_\_

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

Employed By: \_\_\_\_\_

If not employed enter "NONE"

Required for those participating in any Physical Searches away from the Command Center.

### Emergency Contact Name:

Last First

Emergency Contact Phone: (\_\_\_\_)-\_\_\_\_ - \_\_\_\_

Searchers are required to be in at least good physical shape in order to participate in physical searches away from command center.

Health:  Fair  Good  Excellent

Do you have any Medical Conditions that our staff or leaders need to know about?  Yes  No

If Yes, Please Explain: \_\_\_\_\_

IMPORTANT-This could be lifesaving information. This information will be kept confidential.

Have you ever been convicted of a felony?  Yes  No

If Yes, Please Explain: \_\_\_\_\_

Have you ever been convicted of a crime against a child, family violence or moral turpitude?

Yes  No

If Yes, Please Explain: \_\_\_\_\_

Criminal Background Checks May Be Required.

Required for Membership:

Do you have Ham Radio License?  Yes  No

If Yes, Please Provide Your Call Sign # \_\_\_\_\_

Do you have First Aid And CPR?  Yes  No

Certifications, Training or Special Skills?  Yes  No

Not Required for Membership.

Do you have any SAR related Experience? Yes No

If Yes, Please List: \_\_\_\_\_

Please list any SAR equipment you may have to assist USAR in search, rescue and recovery efforts. \_\_\_\_\_

Any Equipment such as ATV's, Horses, Boats, Search and Rescue Canine, Etc... Not required but will be appreciated.

Do you hold a Concealed Weapons or Carry Permit? Yes No

If YES, you are required to notify USAR prior to any activity. USAR does not require any member to carry a Concealed Weapons or Carrying Permit. If you choose to do so, you do at your own risk and must abide by all State and Federal Laws.

Please check all areas that you are interested in assisting with.

Ground Search Boat/Marine Scuba Diving ATVs Horses Canine SAR Air/Pilot Bilingual-Spanish etc... Researcher by Phone Public Relations/Speaking Training Events Flyer Distribution Search Team Meals Equipment Maintenance Carpenter Skills Trade Show Support Command Center Support Printing/Copying Services Event Planning Fund raising/Grant Writing Computer/Data Base Skills Legal Support Medical Support Security/ Investigative Services Other

**Terms and Condition's:**

I Agree that parking permit are only used while auto mobile is on duty subject to terminate and suspension. I Agree to UNITED Search, and Rescue conducting a complete background check if applicable. I Agree that no information with regard to searches will Not be released to any member of the news media, made public in any way or any other organization or used for personal use of any kind. I Agree all information, paperwork or equipment issued etc. are the property of UNITED Search, and Rescue. I will not take photographs or video on any sanctioned searches or events, without the permission of UNITED Search, and Rescue Network supervisory personal. I understand that any tip or information of any kind pertaining to a potential criminal case must be reported and that removal of anything from a search area may be considered interfering with a criminal investigation, a prosecutable offense. I Agree to hold UNITED Search, and Rescue Network harmless with regard to any personal injury or injury, damage or theft to personal property, equipment, including horses and dogs by volunteering or being a member of UNITED Search and Rescue Network. By my signature below I accept these terms. Membership is a privilege and may be denied or revoked at any time. We reserve the right to refuse membership to anyone for any reason.

By signing this you are agreeing to the Terms and Conditions on this form by USAR ESRR/KFN.

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

Date application submitted: \_\_\_\_\_

USAR VEST- our cost- \$150

USAR I'D and Permit-our cost- \$150

Comments/Suggestions \_\_\_\_\_

Referral Member Name or unit Number: \_\_\_\_\_

NOTE: If you do not have a Referral number enter "0000"

**For faster response please email application to [director@unitedsar.org](mailto:director@unitedsar.org)**

Your thoughts are important to us to help better our organization, teams and members. Without you we would have nothing. Thank You for your interest.

For office use only:

Approved by: \_\_\_\_\_

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

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