



MEMBERSHIP APPLICATION

Contact Information

NAME					
Last:		First:		Preferred:	
Address					
City		Province		Postal Code:	
PHONE NUMBERS:					
Home:		Work:		Mobile:	
Email:					
Are you 18 or older? Yes or No					
Do you have a valid driver's licence and access to a vehicle? Yes or No					
What position (s) would you like to volunteer for?					
Support	K9 Handler	Diver	Other:		
K9 Handler Position Only-Please provide information below:					
K9 Name:		Breed		Age	
Training / Experience / Certification(s)					

How did you learn about this volunteer position?

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Why are you interested in becoming a CPAK9 Volunteer?

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Related History

Do you have any search and rescue or relevant experience? If so, please describe.

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Have you ever been a member of a volunteer organization? If so, please list.

Do you belong to any other organizations that may cause a conflict of interest?

Skills and Qualifications (Please attach a related résumé)

We look for special skills and qualifications related to search and recovery and/or enjoying the outdoors and/or community work through your jobs or volunteer positions (e.g. first aid, map & compass, winter travel....).

Fundraising

List any fundraising experience and/or fundraising projects or programs you have taken part in or lead.

Committee Work

List any committee or board work you have done through work or volunteer positions.

Personal Equipment

State what personal outdoor equipment you have....

Something you feel we missed

If you wish to describe any further skills, training, education and/or interests that you feel is possibly relevant to the search and recovery volunteer position, please feel free to attach a separate page.



References

Please provide two (2) references, other than family or friends, whom you have known for over one (1) year (e.g. co-workers, managers...)

Name:			
Relationship:		Phone #:	
Email:			
Name:			
Relationship:		Phone #:	
Email:			

_____ I hereby give CPAK9 my consent to contact the above references regarding this application.

Please review each item below. Initial in the column to the left.	
	I consent to a Criminal Background Check
	I acknowledge and understand the expectations of the role
	I will commit to required activities such as participate in regular training sessions, public relations, fundraising events.
	I verified all information provided is true and accurate
	I acknowledge that CPAK9 is under no obligation to accept me as a volunteer. I have contacted the above references and their willingness to provide a reference for me and confirmed the above information.
	CPAK9 volunteer members regularly provide a service to law enforcement agencies and serve the public in a trusted capacity, often working with vulnerable and minor individuals. A clear Criminal Record Check is required for our members and will be reviewed every two years.
	I acknowledge and agree that it will be a condition of my membership that I sign a waiver of liability in favour of CPAK9, and that I must do so before I will be permitted to participate in any search and recovery activities.

Signature

Date