

# Whitmer VFD SAR Exercise Registration

May 7, 2022

First name	
Last name	
Age	
Department / Organization	
Phone number	
Email address	

Do you feel that you can actively walk through the woods? YES \_\_\_ NO \_\_\_

Do you have training in Search and Recue? YES \_\_\_ NO \_\_\_

If so what? \_\_\_\_\_

Do you have any other specialized training? To include Rope rescue. YES \_\_\_ NO \_\_\_

If so what? \_\_\_\_\_

Do you have experience in Search and Rescue? YES \_\_\_ NO \_\_\_

If yes how many years? \_\_\_\_\_

Are you affiliated with emergency service agency? YES \_\_\_ NO \_\_\_

If so what type of agency? \_\_\_\_\_

Do you wish to be a victim/patient in the exercise? YES \_\_\_ NO \_\_\_

Have you read and signed a liability waiver? YES \_\_\_ NO \_\_\_

Do you agree to dress appropriated for this exercise? To include no open toe footwear  
YES \_\_\_ NO \_\_\_