



APPLICATION FOR MEMBERSHIP IN THE LITTLE SWITZERLAND / THE ROCK VOLUNTEER SKI PATROL

NOTICE: Application must be typewritten or clearly printed in ink. All questions must be answered, if applicable. If not, indicate NA (not applicable). Incomplete or illegible applications will not be considered. If the space provided is insufficient for complete answers or you wish to furnish additional information, please attach additional pages.

1. PERSONAL INFORMATION

Form with fields: Name in Full (Last, First, Middle), DATE OF BIRTH, Address (Apartment, Street, P.O. Box), Home Telephone Number, City, State, Zip Code, Work Telephone Number, Email Address, Cell Phone Number.

Do you know any current members of the Little Switzerland Ski Patrol?

Yes No

If yes, please list their names:

Do you know any full time employees of the Little Switzerland Ski Area?

Yes No

If yes, please list their names:

Have you ever been a member of the National Ski Patrol?

Yes No

If Yes, please indicate dates and Ski Area affiliate:

Have you ever been a member of the PSIA or AASI?

Yes No

If Yes, please indicate dates and Ski Area affiliate:

Equipment I use: (check all that apply)

- Skis, Snowboard, Telemark Skis, None of the above

How many years have you skied or boarded?

- 1 to 5, 6 to 10, 11 plus, Never

What level skier or boarder are you?

- Beginner, Intermediate, Intermediate/ Advanced, Expert

Do you own your own equipment?

Yes No

If no do you plan to Purchase Rent gear prior to the season

Have you ever been certified in first aid?

Yes No

If Yes, please indicate dates and certification Level:

Have you ever been certified in CPR?

Yes No

If Yes, please indicate dates and certification Level:

Are you a Wisconsin State licensed First Responder, EMT, Paramedic, Nurse or Physician?

Yes No

If yes, indicate which level of care and license number(s)

Have you ever been convicted of any felony or misdemeanor offenses in Wisconsin or in any other state OR do you have any felony or misdemeanor offenses pending against you at this time?

Yes No

If yes, on separate pages, list each offense and provide the following information for each offense: copies of police reports, criminal complaint or information, judgment of conviction and sentence, verification of your compliance with all the terms of each sentence, including chemical dependency assessments (if ordered by the court) and verification of your compliance/completion of probation or parole.

