

**Print and Mail to:**  
SARNAK  
Search and Rescue of the Northern Adirondacks  
P.O. Box 1116  
Saranac Lake, NY 12983  
USA

Please read the APPLICATION PROCEDURE section on page 4 of this application. This section includes information on trainings that must be completed PRIOR to applying.

NAME \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE(s) home \_\_\_\_\_ work \_\_\_\_\_

alternate \_\_\_\_\_ cellular \_\_\_\_\_ pager \_\_\_\_\_

HAM RADIO CALL SIGN \_\_\_\_\_ E-MAIL \_\_\_\_\_

DRIVER'S LICENSE # & STATE \_\_\_\_\_

EMERGENCY CONTACT name \_\_\_\_\_ telephone \_\_\_\_\_  
\_\_\_\_\_

Current Employer/School: \_\_\_\_\_

Contact Person & Phone Number: \_\_\_\_\_  
\_\_\_\_\_

**CURRENT/MOST RECENT PREVIOUS EMERGENCY RESPONSE AFFILIATIONS**

1. Organization, \_\_\_\_\_ Position Held \_\_\_\_\_

Contact Person, \_\_\_\_\_ Phone Number \_\_\_\_\_

2. Organization, \_\_\_\_\_ Position Held \_\_\_\_\_

Contact Person, \_\_\_\_\_ Phone Number \_\_\_\_\_

3. Organization, \_\_\_\_\_ Position Held \_\_\_\_\_

Contact Person, \_\_\_\_\_ Phone Number \_\_\_\_\_

**CERTIFICATIONS AND EXPIRATION DATES, if applicable enter certification number. (Please provide photo copy of current certification credential)**

SAR: DEC Wildlands Search: Basic \_\_\_\_\_ Crew Boss \_\_\_\_\_ Other \_\_\_\_\_

ICS: 100 200 300 400 Other \_\_\_\_\_

First aid: CPR \_\_\_\_\_ (indicate level and agency) First Aid \_\_\_\_\_ (indicate agency)

Red Cross When Help is Delayed \_\_\_\_\_ Red Cross Lifeguard Training \_\_\_\_\_

NYS Certified First Responder \_\_\_\_\_ NYS EMT \_\_\_\_\_ (indicate level)

WFA\_\_\_\_\_ WAFA\_\_\_\_\_ WFR\_\_\_\_\_ WEMT\_\_\_\_\_

NSP Outdoor Emergency Care\_\_\_\_\_ Other\_\_\_\_\_

Additional equipment available for personal or team use associated with team activities:  
(e.g.: boat, HAM or CB radio, transport trailer, generator, pump, chain saw, rescue or  
evacuation equipment, ropes, snowshoes, skis, scuba, extra gear, etc.):

Wilderness / SAR background, or special skills (e.g.: professional knowledge, second  
language, skills instructor, membership in outdoor groups, related avocations, etc.):

I agree to uphold the Bylaws and Standard Operating Guidelines of SARNAK. I agree that I will  
become DEC Wildlands Search, certified, or acceptable equivalent, within one year of  
membership. If there has been no certification course available within that time, I agree to  
become certified at the earliest opportunity.

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

**The application fee is \$25.00, payable at the time of application**

Official use only

Date Complete Application Submitted \_\_\_\_\_

Date app fee paid \_\_\_\_\_ Received by \_\_\_\_\_

Business Meeting attend date \_\_\_\_\_ Training attend date \_\_\_\_\_

Membership Vote Date \_\_\_\_\_ Result:\_\_\_\_\_

**SARNAK**  
**Search and Rescue of the Northern Adirondacks**

**Release, Hold Harmless and Indemnification Agreement**

The undersigned, for an in consideration of being considered for membership, hereby authorizes the release of information and documents, so as to verify the information set forth on the application for membership.

The undersigned, hereby agrees to hold harmless and indemnify, SARNAK, its officers, agents, employees and members, from any consequences from attempting to or obtaining, the information and documents.

SARNAK shall not disseminate any information or documents to any other person or entity and shall use the information and documents for the sole purpose of verifying the information provided on the application.

Signature\_\_\_\_\_ Date\_\_\_\_\_

---

## **SARNAK APPLICATION PROCEDURE**

**Prerequisites:** Individuals seeking to apply for SARNAK membership must Attend at least three meetings at least one of which must be a field training **within 90 days of application (?)** and provide documentation of completion of the following FEMA Incident Command courses:

**ICS: 100 (on line at: <http://training.fema.gov/emiweb/is/is100b.asp>)**

**ICS: 700 (on line at: <http://training.fema.gov/emiweb/is/is700a.asp>)**

### **Application Process:**

1. Print and complete all sections of the application.
2. Attach documentation of completion of ICS 100 and 700.
3. Attach other valid credential documentation (CPR, wilderness first aid courses, EMT, SAR courses, etc.)
4. Submit Completed Application with \$25.00 application fee
5. Attend at least three meetings at least one of which must be a field training **within 90 days of application (?)**
6. Internal Review
7. Vote by the Membership

### **Internal Review:**

1. As per Article IV of the By Laws any application submitted for membership shall be sent to the Membership Committee for review.

2. The process that the membership committee shall undertake as part of every applicant's review will include, but not be limited to, verifying current employment and all public safety, SAR, fire service, etc contacts provided by the applicant on the membership application to confirm affiliation data.

3. The results of these verifications shall be included as part of a report by the membership committee to the full membership. The applicant shall be given an opportunity prior to the final report to clarify any discrepancies or unfavorable references.

4. As part of the above mentioned report, the membership committee will also provide a recommendation on an applicant's membership, with explanation, prior to the vote on the applicant's membership.

*NOTE: Employer contact is intended only to verify information on the application. If the applicant claims employment, but would rather we did not contact the employer, other means of proof could be provided.*