



Ohio Search and Rescue Association

United So Others May Live

Membership Application/Renewal Form

Membership Type:

- Individual (\$25.00) Organization/Agency (\$50.00)

Personal Information:

Name: _____ Email: _____
Home Phone: _____ Cell Phone: _____
Address: _____
City: _____ State: _____ Zip: _____

Team Information:

Team Name: _____ Website: _____
Contact Person: _____ Position: _____
Business Phone: _____ Call-Out Phone: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Counties where you are located: _____

Check all that apply:

- Discipline(s):** K9 Air Scent K9 Tracking K9 Disaster K9 Trailing K9 HRD
 K9 Water HRD Ground SAR Type: _____ Dive IC Air CERT
 High Angle Rope Low Angle Rope Cave Collapse Level: _____
 Map/Compass GPS Swiftwater Level: _____ Mounted
 Other: _____

Please make all checks payable to:

Ohio Search and Rescue Association

Please send this application and check to:

The Current Ohio Search and Rescue Association Treasurer