

Application for membership



Powell County Search & Rescue

3134th Street

Deer Lodge, Mt. 59722

Date _____ Name _____ Phone _____

Cell _____ Work _____ Address _____

Zip _____ SS# _____ DL# _____

E-Mail _____ Vehicle Year _____ Make _____

Model _____ Liability insurance ___Y___N___ Date of Birth _____

Height _____ Weight _____ Color of Eyes _____ Color of Hair _____

Occupation _____ US Citizen _____ Years in Powell County _____

Note any sickness or Disability _____

Medications _____

Note any criminal court record(Excluding minor traffic) _____

List two local references _____ Phone _____

_____ Phone _____ List any previous
experience, training, trades or professions _____

Will applicant respond to calls day or night? _____ If no explain _____

Emergency contact name _____ Address _____

Phone# _____ I hereby affirm the above statements are true.

Signed _____