

# Application for training/membership

## Yellowknife Coast Guard Auxiliary

Name:		Date of birth	
Address:			
Day phone:		Evening phone	
E-mail address:			

Do you have any of the following formal qualifications, certifications or licences?

- |   |  |
|---|--|
| <input type="checkbox"/> Standard First Aid   | <input type="checkbox"/> CPR (Level 'C')     |
| <input type="checkbox"/> Radio Licence – Marine                                     | <input type="checkbox"/> Radio Licence - Air |
| <input type="checkbox"/> Canadian Coast Guard Pleasure Craft Operator's Card (PCOC) |  |

Please describe any power boating experience or courses you may have:

Number of years experience: \_\_\_\_\_

Please describe any other boating experience or courses you may have (sail, canoe, kayak, etc.)

Number of years experience: \_\_\_\_\_

Please describe any other skills or experience that you feel would be valuable to a marine search and rescue unit:

Please tell us why you wish to join the Auxiliary – what attracts you to training – what do you hope to gain?

If selected for training, are you able to:

- Commit to 2-3 hours for evening training sessions once per week from February to November?
- Commit to being on call by pager for rescue events upon completion of your training (every other week during operational season, June to October)?

If selected for membership, would you be available to:

- Assist with fundraising and public presence events approximately 6 times per year?
- Assist with vessel maintenance from time to time throughout the winter.
- Sign up for occasional optional courses that are offered?

**Yes. Please consider me for membership in the Yellowknife Coast Guard Auxiliary!**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date