



NZ USAR Search Dog Association

Application For Membership

Once completed send to: USAR Search Dog Coordinator
12 Wiltshire Mews
Avonhead, CHRISTCHURCH 8042

Name: _____

Postal Address: _____

Email: _____

Phone number(s): _____

USAR Affiliation/s (if appropriate):

Eg Team, Organisation

Membership

I am applying for:

- Full Membership
 - o Evidence of Cat1A required e.g.: NZQA Record of Learning, copy of Orange Ticket or Orange Card
- Associate Membership

Supporting Signatures (required from two current full members):

Name: _____ Signature: _____

Name: _____ Signature: _____

Declaration

If admitted to membership, I agree to abide by the rules of the USAR Search Dog Association

Signed: _____ Date: _____

Annual Subscription

Payable on invoice after membership approval.

Full membership **\$10** Associate membership **\$5**

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- I do **Not** want my contact information to be shared with other members.
 - I do **Not** want to receive information relating to the USAR Search Dog by email.