



**ST. MARGARETS BAY
MARINE SEARCH & RESCUE**

Membership Application

Membership Application Instructions

REQUIREMENTS

Applicants must be age of majority (19) in the province of nova scotia

Upon joining the SMBMSAR, the applicant will be on a probation period of 6 months.

APPLICATION INSTRUCTIONS FOR MEMBERSHIP

Please forward your completed application to the Director of Administration Dan Hubley at Smbmsar.society@outlook.com

St. Margaret's Bay Marine Search and Rescue



To be completed by the individual candidate.

The under-mentioned person makes an application to join the St Margaret's Bay Marine SAR

<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.	Surname:	First Name:
Occupation		Canadian Citizen or Landed Immigrant <input type="checkbox"/> Yes <input type="checkbox"/> No
Birth Date Month Day Year		
Current Address:		
City:	Prov:	Postal Code Postal:
Home Phone:	Mobile:	Email:
Next of Kin Name of Next of Kin: _____ Relationship: _____ Contact information: _____		
Memberships in any boating organizations (CPS / CYA)		
Does the applicant have a Marine restricted radio Operators Restricted (VHF) License?		<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> DSC endorsement
Does the applicant hold a Pleasure Craft Operator Card (PCOC)		<input type="checkbox"/> No <input type="checkbox"/> Yes
List courses attended and attached copies of certificates and licenses.		
Qualifications C List professional or trade qualifications		
Involvement in the SMBMSAR Indicate which field(s) of activity interest you <input type="checkbox"/> Accounting <input type="checkbox"/> Public Relations <input type="checkbox"/> Prevention & Expositions <input type="checkbox"/> Newsletter Development <input type="checkbox"/> Administration <input type="checkbox"/> Fund Raising		
<i>I solemnly state the foregoing to be true and I understand any misrepresentation may result in immediate annulment of my membership in the Society. If accepted into the membership for the Society, I agree as a condition thereto, that I will abide by the rules, regulations and bylaws of the Society, and in particular and without limiting the generality of the foregoing.</i>		
Signature of Candidate: _____		Date: _____
Signature of Witness: _____		Date: _____
<i>SMBMSAR Use Only below this line</i>		
Applicant accepted _____ or declined _____		
Reason _____		
Name: _____		
Signature: _____		Date: _____