



# Sierra Ski Patrol – NSP Application



## PERSONAL INFORMATION:

NAME:

LAST

FIRST

MIDDLE

ADDRESS:

STREET

APT/UNIT

CITY

STATE

ZIP

ALTERNATE ADDRESS:

STREET

APT/UNIT

CITY

STATE

ZIP

## CONTACT INFORMATION:

PHONE:

HOME

MOBILE

OTHER

EMAIL:

PRIMARY SNOW SLIDE GEAR:

CHECK ONE →

SKI

SNOWBOARD

YEARS OF SKI/RIDE:

MEDICAL CREDENTIAL:  
(CHECK ALL THAT APPLY)

EMT

OEC TECHNICIAN

PARAMEDIC

NURSE (ANY LEVEL)

PHYSICIAN/PA

WFR

## WHY ARE YOU SEEKING TO JOIN SIERRA AT TAHOE VOLUNTEER SKI PATROL?

HOBBIES/SPORT ACTIVITIES:

PAST PATROLLING EXPERIENCE:

SIGNATURE

DATE