I understand that I must have the Medical Release form filed out by a physician prior to being released as a Call Out Qualified member, or being permitted to respond to the scene of a search incident as a member of SMRG. ___ (Initial)

I understand that as a member of SMRG I will be required to adhere to all SMRG, ASRC, VASARC, PASARC, and MRA operational requirements as appropriate and set forth in the respective operational manuals. As well, I attest to the fact that I have reviewed and understood the contents of aforementioned operational manuals. ___ (Initial)

I attest to the fact that I have reviewed and understood the contents of the SMRG, PATC, ASRC, VASARC, PASARC, MRA bylaws. ___ (Initial)

I understand that as a member of SMRG I am required to abide by all applicable state and federal rules, regulations and laws, including all FCC and traffic laws. ___ (Initial)

I understand that as a member of SMRG I am not permitted to carry a firearm or other weaponry in the PATC building or at any SMRG, ASRC, PATC, VASARC, PASARC, MRA event or search incident. An exception to this standard applies only to Sworn Police Officers who provide documentation, to be placed in their personnel file, that shows an absolute requirement that they be armed at all times. (Others may leave legal personal firearms or other weaponry locked in their vehicles during the above mentioned events and search incidents.) ___ (Initial)

I attest that all information supplied on my SMRG and PATC membership application forms is true and correct as of the date supplied and that all information supplied for my training file has been and will be true and correct as of the date supplied. ___ (Initial)

I understand that I shall only wear the ASRC uniform and/or display the SMRG or ASRC insignia on my way to, from and during searches, training, SMRG or ASRC events, SAR meetings and conferences or when representing SMRG or the ASRC in an official capacity. ___ (Initial)

I understand that I shall not speak as a representative of SMRG, ASRC, PATC, VASARC, PASARC, or MRA unless authorized to do so, as a duly appointed or elected, or by a duly appointed or elected, SMRG officer or representative. ___ (Initial)

I understand that any abuse, misuse or theft of SMRG equipment and resources shall not be tolerated. ___ (Initial)

I understand that I will not accept personal monetary donations for my part in the search and rescue effort. All moneys given to me for SMRG or the ASRC will be immediately sent to the SMRG treasurer. Mishandling of SMRG or ASRC funds will not be tolerated. ___ (Initial)

I understand that safety is of paramount concern to SMRG and if at any time I notice or suspect that a situation is unsafe that it is my responsibility to bring it to the attention of the appropriate officer, incident staff member or field team leader. If at any time I do not feel adequately prepared or conditioned to perform a task assigned to me, for any reason, I understand that it is my duty to refuse or stop the task and immediately notify the appropriate officer, incident staff member or field team leader of my reasons. ___ (Initial)

I understand that SMRG members shall not be under the influence of alcohol or mind altering drugs while wearing the ASRC uniform, or at any time while traveling to or from or participating in a SMRG, ASRC, PATC, VASARC, PASARC or MAR training, public relations or search related event. Any consumption of alcoholic beverages during social events connected to the previously listed organizations shall be strictly within the limits of the law. ___ (Initial)

I understand that if anything I do or say is in contradiction to this membership agreement disciplinary action may be taken by the SMRG chair or the Operations Officer. ___ (Initial)

I understand that any appeals concerning disciplinary action will be handled with a hearing by a committee made up of no less than three members of the SMRG executive committee (as defined in the SMRG bylaws), not to include the SMRG Officer who initiated the disciplinary action under appeal. ___ (Initial)

I understand that as a state licensed EMS agency SMRG’s and ASRC’s chairperson has the authority to request a police background check on any SMRG member. ___ (Initial)

I understand the SMRG membership has the right to expel a member according to the procedure outlined in the SMRG bylaws. ___ (Initial)

I have read and understood every aspect of this membership agreement and agree to abide by it as long as my membership with SMRG is valid.

__________________________(Signature) __________ (Date)