You must be at least <u>18 years old</u> to participate in TERT. All information is kept in strict confidence. You must agree to the conditions in Section D for this application to be processed.

Submit this completed application to membership@tert.org.

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Last Name:		Given Name:			
Mobile/Text:		Preferred Name: City:			
Street:				Zip:	
Date of birth:	Email:				
Affiliated with (UCARES, E	CSTeam, SAR, UVARC, etc.):				
Skills (check all that apply):	Medical Amateur Ra		Radio		
Areas of interest:	Trail Head	Stewart Falls	High Camp		
Emergency contact and	phone #:				
B. MEDICAL EXPERIMENTAL Medical Training:	Med	mation if you are regi	stering with TERT with Mo		
Work in an EMS field? Where?				How Long:	
Describe wilderness EM	S Experience:				
C. COMMUNICATION	S (Important information	if you are registering	with TERT as an Amateur r	radio operator)	
Amateur Call Sign: Y			Years as a licensed operator:		
2m synthesized HT I Two (2) gain antenna	•		atteries for 2 Days		

D. SIGN (Application is only complete if you sign it)

A. PERSONAL INFORMATION (Required of all applicants)

By signing below and submitting this application: I represent the information provided above is truthful and accurate; I understand and agree to the terms of the Utah County Sheriff's Office Volunteer Agreement/Disclaimer form; I acknowledge that I must successfully pass a background check, be accepted as a Volunteer with Utah County, and be accepted by the TERT board, before I will be considered a Team member; I further agree the information I share will be made available to TERT leadership as well as the Utah County Sheriff's Office and US Forest Service, who both sponsor TERT. Signature (Full Name):

Application Date: