

## Candidate Application www.skibrulepatrol.com

		Date
Name		
Address		
City		Zipcode
Home phone		Work phone
Email address		Cell phone
Medical training		Birth date
CPR Qualifications (	circle) No - Yes	(CPR Healthcare Provider) expires
Any medical history patrolling? If so, plea		ent you from performing at 100% of the guidelines for skiing and
Member of PSIA (cir	cle) No - Yes	Number of years
I have skied regularl	y since	I have snowboarded regularly since
I have skied these M	lidwest hills	
I have skied at these	western mountains	
My interest in joining	Ski Patrol is because	
Skiing experience (	-	
<b>Level 6</b> – I ski blue a terrain but can't alwa		a fairly narrow stance. I control my speed effectively on such
<b>Level 7</b> – I ski blue a moderate speed.	and some black terrain with c	confidence and can handle moderate bumps in control at
		ence and can handle moderately wide spaced bumps in balance mally in tight bumps and may have trouble linking turns in difficult
		nce and grace on all groomed terrain, but would like to polish my d crud. I seek challenge in clinic programs.
l'm not at thi	s level of skiing	
Please return to:	Lee Ann Heim PO Box 10532 Green Bay WI 54307	duodiscovery@yahoo.com 920.660.7842