



Borders Water Rescue Team

Team Member Application Form

www.bwrt.org.uk

Thank you for your interest in joining the team. Please fill in the following form and return it to the team secretary at the address below. Your application will be considered by our training committee and the secretary will write to you in due course.

Section 1: Personal Details

Title _____

Date of Birth: _____

First Name: _____

Surname: _____

Home Address: _____

Home Tel: _____

Town/ City: _____

Mobile Tel: _____

Postcode: _____

E-mail Address: _____

Section 2: Work Details

Employer: _____

Job/Post: _____

Work Tel: _____

Section 3: Next of Kin Details

Name: _____

Relationship: _____

Address:* _____

Telephone:* _____

Post Code: _____

*If different from section 1

Section 4: Other Details

Do you suffer from any medical conditions?

Yes / No

If yes, please state: _____

Do you have your own transport?

Yes / No

Do you know any other member of the Team?

Yes / No

If so, who?: _____

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Section 5: Commitment & Availability

A high level of commitment is required by the Team as it can obviously be called out at any time of the day or night usually without much – if any – notice. In addition to call-outs the Team trains once a month and has an exercise several times a year. Please select the answer below which would best describe your availability.

- Are you prepared/allowed/able to attend incidents during working hours?

Yes, anytime Usually, work permitting Occasionally No

- Are you prepared to attend regular Team training once a month? (Normally on a Sunday)

Yes (8 out of 10) Sometimes (6 out of 10) Infrequently (4 out of 10) No

- The Team holds a river exercise 2-3 times per year, usually but not always on a Sunday, please indicate how many you think you would be able to attend per year.

1 - 2 All

Section 6: Personal Skills

Please rate yourself in the following areas from 0 to 5, with 0 being no experience and 5 being excellent.

Map reading		River bank walking	
Swimming ability		Rope work	
Water skills		Radio Communications	
First Aid		Fitness	

Do you hold a current First Aid Certificate? Yes No

If so please give details and renewal date _____

If you have any other skills relevant to the role of the Team, please give details below. You should also include a summary of any relevant water-based experience (e.g. scuba diver, canoeist, distance swimmer, etc).

Thank you for taking time to complete the application form. All information given is treated in the strictest confidence and used only to assess your suitability to begin training.

Please return completed form to:
info@bwrt.org.uk
or
BWRT, c/o 1 Sweethope, Kelso, TD5 7RZ