



# Ice Rescue Trainer Application

A complete application, including all required documentation, must be received at Dive Rescue International headquarters at least 21 days prior to the first day of class.

Training Location \_\_\_\_\_ Date \_\_\_\_\_

## Applicant Information

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_  
Email \_\_\_\_\_ T-shirt size \_\_\_\_\_

**Department/Team Affiliation** \_\_\_\_\_ **Supervisor's Email** \_\_\_\_\_  
Department / Team \_\_\_\_\_ Position / Title \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_ Phone \_\_\_\_\_

This application does NOT guarantee your acceptance into the program. You will be notified of your acceptance after your application has been approved.

## Required Documentation

 All of the following must accompany this application

☐ Letter of team sponsorship ☐ Method of payment ☐ Proof of CPR ☐ Proof of First Aid, EMT or Paramedic

## Payment Information

☐ \$525 (US) ☐ \$550 US (Classes in Canada) All checks must be payable in US funds

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Credit Card Number \_\_\_\_\_ ☐ Department Card Exp. \_\_\_\_\_ Security Code \_\_\_\_\_  
☐ Personal Card  
Purchase Order Number \_\_\_\_\_ Please provide a copy of the PO with registration Check Number \_\_\_\_\_

## Instructor and/or Training Experience

## Water and/or Ice Rescue Experience

Ice Rescue Trainer certificates are earned on the basis of satisfactory class performance. In this way, Dive Rescue International preserves the quality of its programs and reaffirms its commitment to present and future trainees.

Student Ice Rescue kits are a required part of the Ice Rescue Trainer teaching system and must be purchased at least 14 days prior to your department sponsored classes.

Mail this application to:  
Dive Rescue International  
201 North Link Lane, Suite A Fort Collins CO 80524 or  
Fax to (970) 482-0893 or email to [training@DiveRescueIntl.com](mailto:training@DiveRescueIntl.com)

Print Form



# Sample Sponsorship Letter

MUST BE ON DEPARTMENT LETTERHEAD  
and contain the following paragraphs!

**Date**

Dive Rescue International  
Attn: Education Department  
201 North Link Lane  
Fort Collins, CO 80524-2712

Dive Rescue International,

This will confirm that **(name)**, an employee of **(department)** is instructing Ice Rescue to our employees in his/her capacity as a certified Ice Rescue Trainer.

**(Name)** is covered for instructor liability exposure while acting in his/her capacity as an employee of **(department)**. The trainer is defended by the agency self insurance or insured liability coverage.

**(Department)** understands that it is our responsibility to notify Dive Rescue International of changes in this coverage or this employee's status as an employee or instructor.

If you should have any questions on this matter please contact the undersigned.

Sincerely,  
**(Department Name)**

Supervisor's Signature

(Supervisor's Name)  
(Supervisor's Position)