

North Carolina Association of Rescue & E.M.S., Inc.

TECHNICAL RESCUE COMPETITION

ENTRY FORM

Greenville, North Carolina

June 27, 2009

Please print or type

Squad _____

Address _____

City _____ State _____ Zip _____

Email Address: _____

Day Phone # () _____ Night Phone # () _____

Team Captain's Name _____

**"WE UNDERSTAND THAT THIS FORM MUST BE POSTMARKED BY MAY 1
FOR OUR TEAM TO BE ELIGIBLE TO COMPETE".**

Signed _____

Title _____ Date _____

Mail or Deliver Entry Form to: N. C. Association of Rescue & EMS
"TECHNICAL RESCUE COMPETITION"
P. O. Box 1914
Goldsboro, N.C. 27533-1914

Each team that enters, will be sent a complete list of rules, regulations and equipment, or if you desire this list, call or write your state office.

Your squad will be responsible for total care in rescue problems.

Each team is required to send a qualified person to the judge's evaluation and furnish one (1) qualified judge for competition.

North Carolina Association of Rescue & E.M.S., Inc.

TECHNICAL RESCUE COMPETITION

TEAM MEMBERS

Greenville, North Carolina

June 27, 2009

Please print or type

Team Name _____

1. Team Captain _____

2. Team Co-Captain _____

3. Team Member _____

4. Team Member _____

5. Team Member _____

6. Team Member _____

Return to:

***N.C. Association of Rescue & EMS
PO Box 1914
Goldsboro NC 27533***

MUST BE RETURNED & POSTMARKED BY May 1