

Three Rivers Paddling Club Instructor / Assistant / Safety Boater Form

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| Name: <input style="width: 95%;" type="text"/> | Phone: <input style="width: 95%;" type="text"/> | e-mail: <input style="width: 95%;" type="text"/> |
| Safety Gear that you have in your boat: Throw Bag Pin Kit First Aid Kit Breakdown Paddle | Other (list): <input style="width: 95%; height: 40px;" type="text"/> | |
| Relevant First Aid Training you have: Current CPR Expired CPR Current First Aid Expired First Aid | Safety training and dates include SWR and ACA Training: <input style="width: 95%; height: 40px;" type="text"/> | |
| List prior TRPC Clinics where you have Instructed (I), Assisted (A), Safety Boated (SB): <input style="width: 95%; height: 100px;" type="text"/> | | |
| Day you can attend? Saturday Sunday Both | Preferred Role? Instructor Assistant Safety Boater | Preferred Student Age? Adult Youth Either |
| Preferred Student Skill Level? Beginners Practiced Beginners Intermediates Advanced | Number of years paddling? <input style="width: 80%;" type="text"/> Average paddling days per month? <input style="width: 80%;" type="text"/> Most Difficult river-section & class paddled? <input style="width: 80%;" type="text"/> Preferred boat when leading clinics? <input style="width: 80%;" type="text"/> | |
| Other Comments: <input style="width: 95%; height: 150px;" type="text"/> | | |

