

IMG GUIDE APPLICATIONCopies of documents notated with an asterisk (*) are required and must be submitted with resume.

A. PERSONAL INFORMATION:

Full Legal Name:		Date of Birth				
SSN*:	Passport* Number: _		Expires:			
Driver's License* Number:		State:	Expires:			
Permanent Address						
City:	State:		Zip:			
Cell Phone:	Secondar	_ Secondary Phone:				
Email:						
Mailing Address (if different):						
Seasonal Address:						
City:	State:		Zip:			
Permanent Emergency Con-	tact Person					
Name:	Re	Relationship:				
Address:						
City:	State:		Zip:			
Home Phone:	Cell Phone:	Email:				
Additional Emergency Cont	act Persons					
1. Name:		Relationship:				
Home Phone:	Cell Phone:	E	Email:			
2. Name:		Relationship:				
Home Phone:	Cell Phone:	E	Email:			
3. Name:		Relationship:				
Home Phone:	Cell Phone:	F	mail:			

GUIDE APPLICATION continued

CPR training*: EAvalanche training*: L IMG training* sessions Other Pertinent Trainin	Expires:	Date: _	CPR for th	e Professiona ation):		
CPR training*: EAvalanche training*: L MG training* sessions Other Pertinent Trainin	Expires: Standard Expires:evel: (list course a	Date: _	CPR for th	e Professiona ation):	l	
Avalanche training*: L MG training* sessions Other Pertinent Trainin	Expires:	Date: _	of participa	ation):		
Avalanche training*: L MG training* sessions Other Pertinent Trainin	_evel:	Date: _	of participa	ation):		
MG training* sessions Other Pertinent Trainin	(list course a	and date	of participa	ation):		
Other Pertinent Trainin				·		
Other Pertinent Trainin						
	g/Certificatio	ons* (list				
	g/Certificatio	ns* (list				
			with dates	acquired):		
C. CLIMBING HISTOR	RY:					
Year started: Rock	Alp	ine	Sk			
Personal Climbing Re	esume (last	five yea	rs):			
Route Name: F	Rating: Gr	ade:	Location:	Date:	Success:	# Times

GUIDE APPLICATION continued

Name:										
D. GUIDING HISTORY:										
Year started:	Rock _	Д	Ipine	_ Ski						
Personal Gui Route Name:				ars): Location:	Date:	Success:	# Times			
Note: For lea	d guides	, docume	ent at least	100 days of pro	ofessional g	uiding in past	5 years			

(attach additional pages as needed.)