



Thank you for your interest in Crisis Response Canines. Crisis Response Canines (CRC) is a non-profit 501(c)(3) organization comprised of members throughout the United States that has dedicated thousands of hours comforting individuals that have been impacted by personal or community crisis events with their certified K-9 partners. CRC offers volunteer services that are provided by the handlers and their canine partners, offering a level of comfort and calmness that only a K-9 can.

The mission of Crisis Response Canines is to provide comfort and emotional support to individuals and communities with our specially trained K-9's.

Must submit the following with your application:

- Membership Application
- Vet Form
- Signed General Liability Release
- Signed Code of Ethics
- A Letter of Recommendation stating you and your dog's ability to perform Crisis Response work.
- Current Therapy Dog Registration with a National Organization
- AKC CGC Certificate
- Fingerprint Background Check

**Once your application is accepted you and your dog will be responsible for the following:**

- CRC Crisis Working Dog Certification
- Law Enforcement Defensive Systems Crisis Working Dog Certification
- AKC Canine Good Citizen Advance
- AKC Canine Good Citizen Urban
- HIPAA
- Mental Health First Aid
- Psychological First Aid
- Must complete specified National Incident Management System (NIMS) training:
  - 100
  - 200
  - 288.A
  - 700
  - 800
- DRCC Course: Cross Cultural Issues in Disaster Response (If available in your area)
- Canine 1<sup>st</sup> Aid & CPR
- Human 1<sup>st</sup> Aid & CPR

**In the event you have completed any of the above courses, please forward the certificates with your application.**



**Crisis Response Canines Membership Application**

**HANDLER INFORMATION:**

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Phone: \_\_\_\_\_ DOB: \_\_\_\_\_ Blood Type: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Availability: \_\_\_\_\_

**CANINE INFORMATION**

Dog's Name: \_\_\_\_\_ Breed: \_\_\_\_\_  
DOB: \_\_\_\_\_ Microchip \_\_\_ Yes \_\_\_ No  
Microchip Company and #: \_\_\_\_\_  
Sex: \_\_\_\_\_ Neutered/Spayed \_\_\_ Yes \_\_\_ No Weight: \_\_\_\_\_  
Special Accommodations: \_\_\_\_\_  
Primary Vet and Phone: \_\_\_\_\_  
Has the canine ever bite another dog or human \_\_\_ Yes \_\_\_ No If yes, please explain  
\_\_\_\_\_

**EMERGENCY CONTACT FOR HANDLER AND CANINE**

Contact 1

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact 2:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Handler Trainings:**

ICS 100: \_\_\_ Yes \_\_\_ No Date: \_\_\_\_\_

ICS 200: \_\_\_ Yes \_\_\_ No Date: \_\_\_\_\_

ICS 288.A: \_\_\_ Yes \_\_\_ No Date: \_\_\_\_\_

ICS 700: \_\_\_ Yes \_\_\_ No Date: \_\_\_\_\_

ICS 800: \_\_\_ Yes \_\_\_ No Date: \_\_\_\_\_

Canine 1<sup>st</sup> Aid & CPR: \_\_\_ Yes \_\_\_ No Date: \_\_\_\_\_

Human 1<sup>st</sup> Aid & CPR: \_\_\_ Yes \_\_\_ No Date: \_\_\_\_\_

Psychological 1<sup>st</sup> Aid: \_\_\_ Yes \_\_\_ No Date: \_\_\_\_\_

Mental Health 1<sup>st</sup> Aid; \_\_\_ Yes \_\_\_ No Date: \_\_\_\_\_

**Dog Qualifications:**

Therapy Dog Certification: \_\_\_ Yes \_\_\_ No

Organization: \_\_\_\_\_ Date of Test: \_\_\_\_\_

AKC Canine Good Citizen \_\_\_ Yes \_\_\_ No

AKC Canine Good Citizen Advance \_\_\_ Yes \_\_\_ No

AKC Canine Good Citizen Urban \_\_\_ Yes \_\_\_ No

Other Awards or Achievements: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*By signing this application, I certify that all information is true and correct to the best of my knowledge.*