

Wisconsin Ride Smart Trail Patrol Ambassador Program



In Partnership With: In Cooperation With:



Enrollment Application

The Wisconsin Volunteer Trail Patrol Ambassador program has been formed in partnership with the Wisconsin Department of Natural Resources, the Wisconsin ATV Association, and the NOHVIS Group Inc. to promote safe, ethical and responsible use of ATV's and resource conservation. Trail Ambassadors are asked to provide information, direction and aid to trail users on all legal trail systems within Wisconsin.

Duties and Responsibilities:

1. Provide service to both the DNR and the public in OHV recreational activities.
2. Inform, educate and assist all trail users and land managers.
3. Discourage irresponsible behavior through education and public awareness.
4. Know Wisconsin rules and regulations, be helpful, accurate and informed.
5. Assist search and rescue agencies when asked.
6. In the event of an emergency, provide communications with responsible agencies and record all events.
7. Assist all trail users in need of minor mechanical problems and directions.
8. Fill out and send in our trail report forms with all the required information.
9. Make recommendations for improvement of trails and facilities.

Applicant Name:	Training Date / Location:

Please make sure to complete and send in the following items:

- Required for All Trail Patrol Ambassadors (Auxiliary & Advanced)**
- Complete the **Ride Smart Trail Patrol Ambassador Enrollment Application**
 - Complete the Social Security Authorization Form (SSA-89)
 - Complete the Authorization to Release Information Form
 - Return all paperwork prior to the course and include the enrollment fee of \$20
Make checks out to NMS Inc.
- * Only required for Advanced Trail Patrol Ambassadors**
- * Review the **Policy and Procedure Manual**
 - * Complete the **WI DNR Application 8500-161 - Apprentice Application**
 - * Complete the **WI DNR Application 8500-162 - Instructor Training Record and Application**
 - * Complete the **WI DNR Apprentice Instructor Exam**

1. Applicant Name:		2. Club Affiliation (if any):	
3. Mailing Address:			
4. City / State / Zip:			
5. Phone Number:		6. E-mail Address:	
Home:			
Mobile:			
7. Have you ever been convicted of any crime, felony or misdemeanor?			
<input type="checkbox"/> No <input type="checkbox"/> Yes - List all convictions by date and penalty:			
8. Do you own an ATV / UTV?			
<input type="checkbox"/> No <input type="checkbox"/> Yes - Make / Models:			
9. What is your riding experience on an off-highway vehicle (ATV / UTV / Motorcycle / Snowmobile)?			
<input type="checkbox"/> None <input type="checkbox"/> 1-6 Months <input type="checkbox"/> 7-12 Months <input type="checkbox"/> 1-3 Years <input type="checkbox"/> 4-10 Years <input type="checkbox"/> 11+ Years			
10. What seasons do you ride your ATV / UTV?		11. How many miles do you trail ride per year?	
<input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Winter			
12. Have you ever taken an ATV safety course (check all that apply)?			
<input type="checkbox"/> No <input type="checkbox"/> DNR <input type="checkbox"/> ATV Safety Institute <input type="checkbox"/> Other:			
13. What is the reason(s) you are applying to become a Trail Patrol Ambassador?			

14. Do you have any health or physical condition that will impair your riding?	
[] No [] Yes - Please explain:	
15. Are you comfortable talking to people you do not know?	
[] No [] Yes	
16. Do you have any "special" skills that would benefit you in patrolling?	
[] No [] Yes - Please explain:	
17. Are you able to control your anger?	18. Do you have a spouse / friend with whom you hope to ride with?
[] No [] Yes	[] No [] Yes
19. Do you drink alcohol and ride your ATV?	20. Have you ever been cited for an operating a vehicle while under the influence of alcohol / drugs?
[] No [] Yes	[] No [] Yes
21. Are you a current Trail Patrol Ambassador and if yes, when & where was your training?	
[] No [] Yes - Student ID Number:	
22. Have you participated / passed a Wisconsin DNR ATV safety training class?	
[] No [] Yes - Training Date & Location:	
23. Are you a current Wisconsin DNR ATV certified instructor?	24. Have you taught a Wisconsin DNR ATV safety class (check all that apply)?
[] No [] Yes - Instructor ID:	[] No [] Yes - Segment [] Yes - Full Class
25. Have you ever been cited for Disorderly Conduct?	26. Have you ever received any traffic violations?
[] No [] Yes - Please explain:	[] No [] Yes - Please explain:
27. Are you willing to commit patrolling a minimum of eight hours per year and reporting your miles / hours?	
[] No [] Yes	
28. While out riding, what is the one thing that irritates you the most about other riders habits / actions?	

Exit Interview & Payment

The following area is for the class instructor / NOHVIS Regional Coordinator to take notes during the applicants final exit interview. Boxes in green are for the class instructor / NOHVIS Regional Coordinator.

29. Course Enrollment Fee		Due
<input checked="" type="checkbox"/> Background Check: \$20 (Retail \$45) Included Items in Course: <input checked="" type="checkbox"/> WATVA Membership <input checked="" type="checkbox"/> Trail Patrol Vest <input checked="" type="checkbox"/> Identification Card		\$20.00
Payment Information		
<input type="checkbox"/> Club Sponsored *Note: This method must be pre-approved by the NOHVIS Group Inc.* <input type="checkbox"/> Cash <input type="checkbox"/> Check or: <input type="checkbox"/> Visa <input type="checkbox"/> Master Card Credit Card: ____-____-____-____ ____-____-____-____ ____-____-____-____ ____-____-____-____ Expiry: ____/____		
30. Has the applicant met or exceeded classroom involvement / expectations?		
<input type="checkbox"/> No - Explain below <input type="checkbox"/> Yes		
31. Are you comfortable with certifying the applicant as a Ride Smart ATV / UTV Trail Patrol Ambassador		
<input type="checkbox"/> No - Explain below <input type="checkbox"/> Yes		
32. Does this applicant need to be reviewed by the Ride Smart Trail Patrol Ambassador Advisory Committee?		
<input type="checkbox"/> No <input type="checkbox"/> Yes - Please explain:		
33. I <input type="checkbox"/> accept <input type="checkbox"/> do not accept the applicant into the NOHVIS Ride Smart Trail Patrol Ambassador Program.		
Print Name:	Date:	
Signature:		
34. I agree the information is accurate and filled out to the best of my ability. I understand that this information will be kept strictly confidential.		
Print Name:	Date:	
Signature:	Location:	