

Alpine Climb Leader Application

Name: _____ Date: _____ Signature: _____
Email: _____ (Typed name or initials will be regarded as a valid signature)

Tacoma Leadership Seminar Leader: _____ Date: _____
AIARE Level 1 Avalanche Course Leader: _____ Date: _____

Mentored Basic Climb — Alpine, Rock, or Glacier

Peak	Date	Mentor
_____	_____	_____

Note: Climb lead status contingent upon Intermediate & Basic Committees' & Climbing Chair approval. Applicants must demonstrate good leadership skills and judgement.