



# Western Chapter ISA Tree Climbing Championship Volunteer Registration Form

**June 6-7, 2026 | Meadow Park | 2333 Meadow St | San Luis Obispo, CA 93401**

(Please Print Clearly)

Thank you for your willingness to share your time and talents to support the event. WESTERN CHAPTER ISA may provide your information to staff, event volunteers, and WESTERN CHAPTER ISA contracted individuals for review and consideration in assigning volunteer roles to meet the needs of the event.

Volunteer Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City, State/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Shirt Size:  S  M  L  XL  2XL  3XL

1. Are you an ISA Member?  Yes  No Member of WESTERN CHAPTER ISA?  Yes  No

2. Do you hold any industry certifications?  Yes  No

If yes, please specify all that apply:

- Board Certified Master Arborist  Certified Arborist  Certified Tree Worker / Climber Specialist  
 Certified Tree Worker / Aerial Lift Specialist  TCIA CTSP  Other: \_\_\_\_\_

3. Dietary Considerations:  NONE  Vegetarian  Vegan  Gluten Free  Dairy/Casein-Free  
 Food Allergy/Intolerance  Other

If you selected "Food Allergy/Intolerance" or "Other", please list: \_\_\_\_\_

4. Dates available to volunteer (Check all available dates)

- Thursday, June 5th  Friday, June 6<sup>th</sup>  Saturday, June 7<sup>th</sup>  Sunday, June 8<sup>th</sup>  Available all days

5. At which tree climbing competitions have you previously volunteered?

- ITCC  NATCC, ETCC, APTCC  Chapter/Associate Organization  Other  Have not volunteered

6. Which events do you have experience in at each of the competitions indicated above?

- Work Climb  Aerial Rescue  Belayed Speed Climb  Ascent Event  Throwline  
 Masters' Challenge  No experience

Which event roles did you have and at which competitions? \_\_\_\_\_

7. Do you have any experience working with the TCC scoring program?  Yes  No

8. Are you First Aid/CPR Certified?  Yes  No

9. Do you have experience as a gear check technician?  Yes  No

If yes, please list specific qualifications or experience: \_\_\_\_\_

Due to the nature of the event all special needs may not be accommodated. If you have special needs that may affect your participation in this event, please specify. WESTERN CHAPTER ISA may provide special needs considerations to staff, event volunteers, and WESTERN CHAPTER ISA -contracted individuals in an attempt to meet accommodations. A WESTERN CHAPTER ISA staff member will contact you, if necessary, for additional information.

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**PUBLICITY CONSENT:**

I authorize WESTERN CHAPTER ISA, event volunteers, and other WESTERN CHAPTER ISA contracted individual's permission to take photographs or video of me that may be used and published in either print or electronic media. I understand that WESTERN CHAPTER ISA posts photography notices stating other individuals so not have permissions to use photos or video in any manner without consent of the WESTERN CHAPTER ISA or the individual photographed.

Agree     Disagree

I authorize WESTERN CHAPTER ISA to provide event photos that may include my image to commercial entities, such as event sponsor, for use in promoting their participation and support of the event. Any other commercial use of the photos must have written consent of WESTERN CHAPTER ISA and the individual photographed.

Agree     Disagree

I authorize that with or without said photographs, WESTERN CHAPTER ISA may publish my name for any lawful purposes such as publicity materials, media releases, social media, and advertising.

Agree     Disagree

Climber/Volunteer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Questions? Contact Chad Brey 612-719-1965 ([treeclimbing@gmail.com](mailto:treeclimbing@gmail.com)) or Jared Abrojena 925-584-7449 ([jared@academy-trained.com](mailto:jared@academy-trained.com))