

# Volunteer Registration Form

## Personal Information

First Name

Email

Last Name

Home Phone #

Gender ☐ Male ☐ Female

Work Phone #   Ext

Mailing Address

Cell Phone #

Apt/Suite #

Pager #

Zip Code

Fax #

## Volunteer Programs

You are volunteering for: (check all that apply)

- ☐ Emergency Operations Center - Coordinator/Staff
- ☐ Exercise Victim
- ☐ Community Emergency Response Team (CERT)
- ☐ Public Education
- ☐ Admin/Office Work

## Soft Skills

Check all that apply:

- ☐ Amateur Radio Operator
- ☐ BiLingual (English/Spanish)
- ☐ Computer Data Entry/Computer Programming
- ☐ Other (please indicate below)

## Training

List any formal disaster training or disaster experience you may have. List by name any courses or programs you have received certification in:

## Vehicle Qualification

Identify any vehicles AVAILABLE (A) for use, or which you are QUALIFIED (Q) to operate (Enter "A" and/or "Q"):

☐ Car

☐ Maxi-Van 15+

☐ Forklift

☐ Bus

☐ Camper/RV

☐ Tractor/Trailer (Describe)

☐ Van/SUV

☐ Truck 24' or less

☐ Other (Describe)

## Notes

Do you have any limitations (physical, family, work) that could limit your volunteer work?

☐ Yes ☐ No

If so, please explain here:

Please click the 'Submit by Email' button at the top of this form to send your information by email, or click the "Print" button and fax the information to the Division of Emergency Management office at 859-252-8689. Thank you.