Cary CERT Association

Member Information Form

Please print clearly

Date Completed _____

Name _____

Nickname _____

Address _____

Neighborhood _____

Cary Fire District Number _____

City _____ State _____ ZIP Code _____

Telephone - Home _____ Cell _____ Work _____

E-mail address _____

Occupation _____

Specialized Skills? _____

_____

Date of CERT Basic Course completion _____

Have you completed the FEMA IS-100 and IS-700 courses? _____
(Please provide a copy of each certificate to CaryCERT@gmail.com for inclusion in your training folder)

Are you a member of the Cary CAP (Citizens Assisting Police) Team? _____

If you are a member of a Neighborhood Watch, provide name: _____

Have you taken a First Aid course? _____ Date _____

Have you taken a CPR course? _____ Date _____

Are you are an amateur radio operator? _____

　　Call Sign _____ License Class _____

Any physical restrictions or limitations? _____

_____