

# Fremont Township CERT Volunteer Application



## Volunteer Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone/Cell Phone	
E-Mail Address	
Social Security # (last 4)	XXX-XX-

## CERT Training Program for 2020

**Spring 2020 Session Dates:** January 28, February 4, February 11, February 18, February 25, from 6:30-9:30 p.m. Must attend all sessions.

## Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone/Cell Phone	
E-Mail Address	

## Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I submit that I have not been convicted of any criminal activity and that I consent to a background check if required by Fremont CERT.

Name (printed)	
Signature	
Date	

**Please return the completed application to:**

**Fremont Township CERT Training, 22385 Highway 60, Mundelein, IL 60060 or email to: Judy Hammel @ 3jham@earthlink.net.**