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 2024

Nothing Scheduled at this time.

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:

Email to: Judy Hammel: <u>3jham@earthlink.net</u>. Or Lou Bruno: <u>lou5535@gmail.com</u>.