

CHRISTMAS TREE HILL NEIGHBORHOOD RESPONSE GROUP CONFIDENTIAL RESIDENT INFORMATION FORM

Please be assured that your information will be treated as confidential, will be shared only with the CTH NRG Emergency Response Team and first responders and is solely for the purpose of assisting you to prepare for, respond to, and recover from a major emergency or disaster. Please complete the form and deliver or mail it to CTH NRG c/o 200 Marina Vista Avenue, Larkspur, CA 94939, or email it to: cthnrg@gmail.com. Thank you!

PLEASE PRINT

1.	Α	dd	res	SS:

Number	Street	Town	Zip Code

2. Adult residents' first and last names:

	First Name	Last Name
1		
2		
3		
4		

3. Children's first and last names and birth year:

	First Name	Last Name	Birth Year							
1										
2										
3										
4										

4. Phone Numbers:

	Ar	ea Co	de	Phone Number													
Cell 1								-									
Cell 2								-									
Home								-									
Office 1								-									
Office 2								-									

5. Primary email address/addresses:

	_	,	-		 		_														
1																					
2																					

6. Emergency contact(s) not in our earthquake zone:

	Name	Phone Number(s)
1		
2		

7. Pet(s) Name(s) and Type(s):

	Name	Type of Pet (dog, cat, etc.)
1		
2		
3		
4		

8. What additional information would members? (i.e., people with special			or rescue workers to know about your household al conditions, etc.):
	-		
9. Has any adult in your household att			ency preparedness training?
Training 'GET READY' Class	Yes	No	
CERT Training			
FADR Training			
Other relevant training (please			
describe)			
describe)			
10. Does any adult in the household ha	ve med	ical tra	ining?
Training	Yes	No	
Doctor			
Nurse/Nurse Practitioner			
First Aid			
Other (please describe)		I.	
,			
44. Do you have recourses that could h	a uaad	in dias	otor woodyour?
11. Do you have resources that could b Equipment	Yes	No	ster recovery?
Pick-up truck or 4-wheel drive	163	NO	
Chainsaw			
Generator			
Other equipment/supplies that could be			
used (please describe)			
used (piedse describe)			
12. Does any adult in the household	l have a	armed f	orces, National Guard, police, or fire training?
Training	Yes	No	If Yes, Who
Police			,
Fire			
National Guard			
Armed Forces			
Other relevant training (please			
describe)			
	ve hand	ds-on d	isaster response/recovery experience?
Type of Experience			Who
44.1.41			
14. Is there any other emergency prepa	rednes	s relate	ed information you wish to share with us?

Please notify us if any significant change occurs in the information you have provided to the NRG, or if you plan to move away. Thank you for submitting your information.