CHRISTMAS TREE HILL NEIGHBORHOOD RESPONSE GROUP CONFIDENTIAL RESIDENT INFORMATION FORM

Thank you for filling out the form below. Please be assured that your information will be treated as confidential, will be shared only with the NRG Emergency Response Team, and is solely for the purpose of assisting you to prepare for, respond to, and recover from a major emergency or disaster.

PLEASE PRINT

1. Address:

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	Area Code Phone Number													
Cell 1								ı							
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 I 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	Yes	No	
'GET READY' Class			
CERT Training			
FADR Training Other relevant training (places			
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)		1	
,			
44. Barrer harranta anno 46.4 anno 14.6			-1
11. Do you have resources that could b	Yes		ster recovery ? 1
Equipment Pick-up truck or 4-wheel drive	res	No	
Chainsaw			
Generator			
Other equipment/supplies that could be			
used (please describe)			
dod (picase describe)			
12. Does any adult in the household	l have a	rmed 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)			
42 Dans and adult in the household be			it
Type of Experience	ve nanc	as-on a	isaster response/recovery experience? Who
Type of Experience			VVIIO
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.