



Chatham County, NC
CERT Program
Membership Application

The following information is required – please print legibly!
When completed, turn in to an officer at any Chatham CERT meeting or submit to ChathamCERT@Outlook.com.

Full Name \_\_\_\_\_
Home Address \_\_\_\_\_
Mailing Address \_\_\_\_\_
Neighborhood / Subdivision \_\_\_\_\_
Email Address \_\_\_\_\_
Home Phone \_\_\_\_\_ Emergency Contact Information
Cell Phone \_\_\_\_\_ Name \_\_\_\_\_
Cell Provider \_\_\_\_\_ Relationship \_\_\_\_\_
HAM Callsign/ID \_\_\_\_\_ Phone \_\_\_\_\_

I am currently or was formerly:

- Military
Medically Trained
Fire Department
Law Enforcement

FEMA Training ID \_\_\_\_\_

I have completed/taken the following:

- NC-317 CERT Basic Training Class (Classroom)
IS-317 Introduction to CERT (Online)
ICS-100 Introduction to the Incident Command System (ICS)
ICS-200 ICS for Single Resources & Initial Action Incidents
ICS-700 National Incident Management System (NIMS) An Introduction
ICS-800 National Response Framework, an Introduction

List here skills you feel you will bring to Chatham CERT, other CERT programs you have participated in, or requirements for accommodations. If there is insufficient space here, indicate below and continue on the reverse.

Continued on reverse

As a CERT member you may be asked to work in situations which expose you to confidential data and/or exposed to confidential data or property. If you do not wish to have a free background check performed, skip this section. A background check will be required for some duties and offices.

Driver License # \_\_\_\_\_ Date of Birth \_\_\_\_\_

I give permission for any still image (photography) or video footage in which I may appear to be used for whatever purpose is deemed appropriate. I do this voluntarily and with the understanding there is no remuneration. In addition, I release any involved agencies and/or jurisdictions from any liability related to my participation in CERT activities including training, deployment, or other CERT related activities. I hereby certify the information I have provided in this application is true and accurate to the best of my ability.

Signature \_\_\_\_\_ Date \_\_\_\_\_