

Your home phone _____ Work phone _____

Cellular phone _____ Pager _____

Do you own or have access to a (circle one) Computer, Computer w/Fax modem, Fax machine

If you have fax capability, what is your fax number?

At home: _____ At Work: _____ Other: _____

Do you have access to the internet? yes ___ no ___

If yes, what is your E-Mail Address: _____ @ _____.

Date of Birth _____ (optional)

Do you have any physical or medical conditions that might affect your participation in some of the exercises used in this course? (e.g., Back problems, heart condition, please explain)

(Answering the above question by no means disqualifies you from participating in this program, but it does allow the instructors to consider limitations you may have in performing certain tasks. All information will be kept confidential).

Since we are a government agency, we require knowledge of your background.

Have you ever committed a felony, misdemeanor, or DUI?

yes ___ no ___ If yes, please explain:

(Answering the above question by no means disqualifies you from participating in this program. All information will be kept confidential).

What allergies do you have? _____

How long have you lived in Florida? _____

Do you reside in Bonita Springs seasonally? _____

Have you ever experienced a hurricane? _____

Have you ever experienced a brushfire? _____

Have you been in the military or other agency that you feel may help you in this program? If yes, explain

Have you received previous training in (circle all that apply)

First Aid	CPR	EMT	LPN	RN	Other Medical_____
Incident Command	Team Building	Organization	Psychological First Aid	Fire Suppression	Law Enforcement
Search-Rescue Techniques	Disaster Preparedness	Weather Emergencies	Wilderness Survival	Damage Assessment	Documentation/Recordkeeping

The cost of the course is free. This includes all materials you will need to complete the training, but does not cover the cost of any additional equipment you may wish to have on hand in the event of a hurricane or major emergency.

