



## PORTLAND CT CERT TEAM MEMBERSHIP APPLICATION

Department of Emergency Management

Community Emergency Response Team

33 E. Main Street -- P.O. Box 71

Portland, CT 06480-0071

<http://www.portlandct.org/cert>

### CERT VOLUNTEER (Please print)

Name:	_____
Address:	_____
Cell phone:	_____
Home phone:	_____
E-mail:	_____

I have specialty training or skills in:

_____
_____
_____

I have completed the following FEMA or CERT training courses:

_____
_____
_____

### EMERGENCY CONTACT

Name:	_____
Relationship:	_____
Address:	_____
Cell phone:	_____
Home phone:	_____
E-mail:	_____

VOLUNTEER'S SIGNATURE: \_\_\_\_\_

DIRECT QUESTIONS TO (860) 262-7239 or E-MAIL [cert@portlandct.org](mailto:cert@portlandct.org)