CERT TRAINING APPLICATION

_____

Last Name   First   Middle Initial

_____

Address   City   Zip Code

Date of Birth _____/_____/_____
              Month   Day   Year

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Email: _____

How did you learn about CERT?

Why do you want to be a CERT member?

Would like to be on the Carbon County CERT's call-out list for emergencies?

Other comments:

Signature: _____ Date: _____

Submit application to: email Region6CERT@carbon.utah.gov, or fax (435) 636-3741, or mail

Carbon County Emergency Management
Attention: CERT Coordinator
120 East Main Street
Price, UT. 84501

Please contact Whitney if you have questions at (435) 636-3740 cell (435) 650-0131