



CHEF DISASTER RELIEF FORM

By filling out this form, you are Volunteering to be called in the event of an Emergency to help with Food Preparation, or Safety on site of an Emergency, as the location becomes evident.

1. Restaurant or Company Name: _____

2. Chef's Name: _____

3. Title: _____

4. Favorite Cuisine: _____

5. Address: _____

6. City: _____ State: _____ Zip: _____

7. Phone: _____ Cell: _____

8. Fax: _____

9. E Mail: _____

10. Web site: _____

Are there any mitigating circumstances surrounding this commitment?

I am willing to travel _____ miles to get to a Disaster.

DATE: / /