



CONSUMER 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. Name: _____
2. Occupation: _____
3. Preferred Task: _____
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: / /