

**COMMUNITY EMERGENCY RESPONSE TEAM
C.E.R.T. APPLICATION**



If you want to volunteer your services and become trained to protect yourself and families from disaster; natural or man-made become a C.E.R.T. member.

For more information, visit our website at www.tintonfalls.com

(Please Print Clearly)

Name: _____ Phone #: Home Work Cell

Address: _____ (____) _____

_____ Email Address: _____

Occupation: _____ Drivers License #: _____

Brief description of prior training in emergency response, if any:

Please email completed form to: oem@tintonfalls.com

**If you have any questions, please feel free to contact Office of Emergency Mgmt. "OEM" at
732-542-3400 Ext. 555**

**Borough of Tinton Falls
556 Tinton Avenue
Tinton Falls, NJ 07724**

Office Use Only: Date Received: ____/____/____ Routed To: _____