



James City County CERT Registration

Please submit to: Caroline O'Brien
Emergency Services Specialist

Email: cobrien@james-city.va.us

Phone: 757-564-2142

Name: _____

Address: _____

Neighborhood: _____

The class you are registering for: _____

Email: _____

Telephone(s): _____

You must be at least 18 years old to register for the JCC CERT course.

Missed Class Policy: The Disaster Prep, Medical Operations I and II, and Search and Rescue classes are mandatory. If missed, the student will be dropped from the course but may enroll in a later course. Other classes, if missed, must be made up in the next consecutive course or the student will need to repeat full course.

If your neighborhood has an established JCC CERT neighborhood team, do you consent for your contact information (name, email, phone numbers) to be forwarded to your neighborhood's team leader? Yes _____ No _____

Name (please print) _____

Signature: _____ Date: _____

Have you ever taken CERT training or participated in a CERT program? If so, please describe:

How did you hear about James City County CERT? _____

What are you hoping to achieve through CERT training? _____

Have you ever been in a disaster? No _____ Yes _____ If yes please describe:

If you answered yes to the above question, were you involved as a professional or volunteer? If yes, please list what organization and the work you did. _____

PROFESSIONAL qualifications or experience, please indicate if you are active or retired:

Law Enforcement _____ Medical _____

Military _____ Fire Service _____

Transportation _____ Project Management _____

Other: _____

Other relevant certifications or training:

CDL _____ VIPS/NW _____

MRC _____ Skywarn _____

ARC _____ RACES _____

Other: _____

Comments: _____

