



Neighborhood Response Group Resident Information Form

Thank you for completing this form. Your information will be shared with your Block Captains and the Command Team for use in the event of a major disaster and to send you important announcements on training and emergency preparedness.

Your Name

Home Address

Preferred Contact Email

Preferred Contact Phone Number (cell)

Preferred Contact Landline Number (if applicable)

Emergency Contact Name & Number

Please choose someone outside Marin County, if possible.

How many adults, including yourself, live in your home?

How many children (under 18) live in your home?

If you have pets, please briefly describe.

Does anyone in your home have training or qualifications that may be helpful in an emergency? For example, first aid, CERT, electrician, caregiver, etc. If so, please describe.

Does anyone in your home have needs that may limit their safety in an emergency? For example, mobility issues, impaired hearing, etc. Please give as much detail as you would like to disclose.

Do you have resources that may be helpful in an emergency (generator, chain saw, solar supply, etc.)? If so, please list below.

Do you know where your gas shutoff is and how to turn it off? Please describe the location for emergencies.