

PARK COUNTY CERT Training Registration



Name: _____
(Please Print)

Mailing Address: _____

Telephone: Home _____ Work: _____ Cell: _____

E-Mail Address: _____

Are you interested in becoming a member of the team upon successful completion of the course?

_____ Yes _____ No _____ Undecided

If you checked "Yes" to the above question, please make sure to ask for a CERT Member Application. (All applicants must meet team member requirements).

Signature

Date of Registration

PLEASE RETURN THE REGISTRATION TO:

**CERT
Park County Homeland Security
1131 11th Street
Cody, WY 82414
Contact**

Jack Tatum (307) 527-1860 or email this completed form to: jtatum@parkcounty.us

(Form Updated 01/10/2020)