

**DeKalb County Emergency Management Agency
Community Emergency Response Team (CERT) Course**

Please fill in the start date for the class you wish to attend and circle the day of the week for that nine-week session. One application per person.

Applying for class start date ____/____/____ AM / PM
Class Day of the Week (Circle One): Sun Mon Tue Wed Thurs Fri Sat

Please Print Clearly:

Name:

Street Address:

City:	State:	Zip:
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Do you live, work, worship or attend school in DeKalb County?

Telephone (Day):	(Evening):
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Email:	T-Shirt Size:
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**Please mail this packet to:
DeKalb County EMA
ATTN: Thomas Paige
1960 W. Exchange Place
Tucker, GA 30084**

**Or email to:
tpaige@dekalbcountyga.gov**

List any experience you have had with disaster training and/or exercises:

**DEKALB COUNTY EMA
EMERGENCY INFORMATION**

All of the following information is kept strictly confidential. It is only used in case of an emergency.

Name: _____ Date of Birth: _____

Hospital Preference: _____

Medical Information:

Medications Currently Taking (name & dosage): _____

Allergies (food, medications, insects, plants, etc.):

Medical History:

Physical Limitations:

Emergency Contact: (please list 2)

Name: _____

Relationship: _____

Home Phone: _____

Cell Phone: _____

Other Phone: _____

Name: _____

Relationship: _____

Home Phone: _____

Cell Phone: _____

Other Phone: _____

**DEKALB COUNTY EMA
CERT QUESTIONNAIRE**

The information on this sheet is used to enable us to compile statistical data for yearly reports.

Occupation: _____

How did you hear about the CERT Course?

Why do you want to attend the CERT Course?

Age Group (circle one):

18-25

26-35

36-45

46-55

56-60

60+

Do you currently volunteer with an organization? YES NO

Which one(s)?

Are you interested in volunteering with the DeKalb County Fire Rescue Reserve (Volunteer)

Program, administered by DEMA? YES NO MAYBE

DeKalb County
Emergency Management Agency
Release from Liability and Indemnification Agreement

I, _____ (print name), (hereinafter "Volunteer") have entered into an agreement with DeKalb County, by which I have voluntarily agreed to participate.

1. Voluntary Participation. I am not an employee of DeKalb County, for which I will be performing voluntary services. I will assume liability for any bodily or personal injury received as a result of performing the voluntary services. I further agree that, if I suffer any bodily or personal injury or illness arising out of, and in the course of, performing the voluntary services, I will not be entitled to recover any workers' compensation benefits.

2. Release. I hereby agree that I, my assignees, heirs, distributees, guardians and/or legal representatives will not make a claim or institute any proceeding against, sue or attach property of DeKalb County on account of injury, illness or damages resulting from negligence or other acts, howsoever caused, by any employee, agent or contractor of DeKalb County as a result of my participation in the volunteer service. I hereby release DeKalb County from all actions, claims or demands that I, my assignees, heirs, distributees, guardians, and legal representatives now have or may hereafter have for injury, illness or damages from my participation in the volunteer service.

3. Indemnification. I hereby agree to assume responsibility and liability for any damage, loss, or injury, including death, of any kind or nature whatever to person or property, including employees and property of DeKalb County, caused by or resulting from any error, or omission of the Volunteer, or the negligent act of the Volunteer or its subcontractors or any of their officers, agents, servants, or employees, arising from the performance of the work under this Agreement. The Volunteer shall defend, indemnify, and hold harmless DeKalb County and all of its officers, agents, servants, or employees from and against any and all claims, loss, damage, charge, or expense to which they or any of them may be put or subjected by reason of any such damage, loss, or injury. The Volunteer expressly agrees to defend against any claims brought or actions filed against the County, where such claim or action involves, in whole or in part, the subject of the indemnity contained herein, whether such claims or actions are rightfully or wrongfully brought or filed.

4. Knowing and Voluntary Execution. I have read this release and indemnification agreement and fully understand its contents. I am aware that this is a release of liability and indemnification agreement, that it is a contract between DeKalb County and me and I am signing it of my own free will.

PHOTO RELEASE

Permission is granted to DeKalb County, any or all of its behalf, to photograph or videotape _____ (print name) for purposes of publicity, public relations, advertising, newsletters and the like. The photographs are discharged and released from any and all claims arising out of the use of photos or videotapes or any rights I may have to the tape. I understand that all photographs or videos of me are subject to disclosure under the Georgia Open Records Act, O.C.G.A. § 50-18-70, et seq.

I have read the above statement and allow myself to be photographed.

Executed on this _____ day of _____, 20_____.

Signature of Volunteer

Printed Name of Volunteer

Notary Public

My Commission Expires On:

A recent (within 6 months) background check is required to attend class. Government ID is required for a background check. It may be obtained from any of the following agencies. Please, submit a copy to Thomas Paige.

Agnes Scott College

137 S. McDonough St.
Decatur, GA
404-471-6355
Cost: \$10.00 Cash only
Hours: 8:30-5:00 p.m. (M-F)
Same day service if there by 4:00 p.m.

Brookhaven Police

2665 Buford Highway
Brookhaven, GA 30324
404-637-0600
Cost: \$10.00 Resident/\$20 non-resident
Hours: 8:30-4:30 p.m. (M-F)
Same day service

Chamblee Police

3518 Broad St.
Chamblee, GA
770-986-1068
Cost: \$10.00 Cash only
Hours: 8:00-6:00 p.m. (M-F)
Same day service

Clarkston Police

3921 Church St.
Clarkston, GA 30021
404-292-9465
Cost: \$15.00 Cash or Credit Card
Hours: 9:00-4:30 p.m. (M-F)
Same day service

Decatur Police

Only for City of Decatur residents.

DeKalb Police

1960 W. Exchange Pl.
Tucker, GA
770-724-7740
Cost: \$20.00 Cash only
Hours: 8:00-5:00 p.m. (M-F)
Same day service

Dunwoody Police

4800 Ashford Dunwoody Rd.
Dunwoody, GA
678-382-6900
Cost: \$20.00 Cash only
Hours: 8:00-4:00 p.m. (M-F & Weekend)
Same day service

Emory Police

1784 N. Decatur Rd.
Decatur, GA
404-727-8005
No cost to Emory Students or Staff Only
Hours: 8:00-5:00 p.m. (M-F)
Will mail to you – not same day service

Lithonia Police

6980 Main St.
Lithonia, GA (Wayfield plaza)
770-482-8947
Cost: \$15.00 Cash, exact amount
Hours: 8:00-4:00 (M-Thurs.)
1:00-4:00 p.m. (Fridays)
Same day service

Pine Lake Police

459 Pine Dr.
Pine Lake, GA
404-292-4250
Cost: \$20.00 Cash only
Hours: 8:00-4:30 p.m. (M-F)
Same day service

Stone Mountain Police

922 Main St.
Stone Mountain, GA 30083
770-879-4980
Cost: \$20.00 Cash or Money Orders Only
Hours: 9:00-4:00 p.m. (M-F)
Same day service