

**TORRANCE COUNTY EMERGENCY MANAGEMENT CIVILIAN VOLUNTEER ASSOCIATION**

**Applicant Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_ **Can we text you?**    **Yes**        **No**

**Physical Address:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

**Skills, Experience or Certifications** (i.e Food, Shelter, Communications, Medical, Other)

**Area You Would Like to Volunteer In.** Please select all that apply.

- |                    |             |         |
|--------------------|-------------|---------|
| AllTorrance County | Manzano     | Torreon |
| Chilili            | Moriarty    | Willard |
| Encino             | Mountainair | Other   |
| Estancia           | Tajique     |         |

**Organizations applicant currently belongs to**

I hereby certify that the above information is correct and that I have not misrepresented myself. I give Torrance County Emergency Management permission to add me to the Code Red Volunteer group for the areas that I have selected. I understand that I may receive a phone call or text message from Code Red (800) number.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

For questions, contact [sodell@tcm.us](mailto:sodell@tcm.us) or 505-297-9981. Return completed form to [sodell@tcm.us](mailto:sodell@tcm.us) or PO Box 48, Estancia, NM 87016.