



# McKinley County, New Mexico

## Local Emergency Planning Committee

### MEMBERSHIP APPLICATION (2012 – 2013)

DATE: \_\_\_\_\_

***PRINT***

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Agency: \_\_\_\_\_

Address: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Pager: \_\_\_\_\_ Email: \_\_\_\_\_

Are you interested in serving on a Sub-committee?  **Yes**  **No**

If yes, please select from one of the following:

- Planning Committee***
- Public Safety Committee***
- Training and Exercise Committee***
- Public Health Committee***
- Business/Industry Outreach Committee***

\_\_\_\_\_  
Applicant's Signature