



McKinley County, New Mexico

Local Emergency Planning Committee

MEMBERSHIP APPLICATION (2014 – 2015)

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