

Date ___/___/___

Church of the Palms Survey Form (Please Print)

Do you need help filling out this Survey Form?

Call the Church at 941-924-1323 and give them your name so a volunteer can call to help you!

This survey form should be completed for the EPC Emergency Preparedness Committee and returned to the church office or deposited at the Information Center on Sunday. The information contained in it will be confidential and utilized only in the need for an evacuation or in response to an emergency or disaster.

Last Name _____ First _____ # in family _____ Name _____
Address _____ Phone _____ Cell 1 _____ Cell 2 _____
City _____ St _____ Zip _____ -(_____) GPS: _____ Log _____ Lat _____
E-mail _____ Fax (_____) _____
The name of the Community/Development you live in! _____

1. Do you have a family plan in the event of an emergency or mandatory evacuation? ___ Yes ___ No
If "no", then please consult emergency information and make your family unit plan.
2. The SPECIAL NEEDS QUESTIONNAIRE is used to form a confidential listing, by Sarasota County, that is maintained on an annual basis of people who need assistance due to their physical or medical condition, and have no other alternative for safe shelter. Do you need help from the County ___ Yes ___ NO
Have you registered with the county for special needs sheltering? ___ Yes ___ NO
(If "No" do you need help filling out the Special Needs Questionnaire) ___ Yes ___ NO
Do you live in Manatee County? ___ Yes ___ No
Are you dependent on emergency support equipment? ___ Yes ___ No
3. If Church of the Palms is asked about your welfare after an emergency, do you have a contact person, family/friend, outside affected area? Please list a contact person outside immediate area:
Name _____ Relationship _____
Address _____ Add 2 _____
City, St, _____ Zip _____ -(_____) Phone (____) _____
4. Would you accept church families who may be required to evacuate from the beaches and low lying areas? In the event of a mainland disaster not affecting beach areas, will you accept church families who may be in need? Please indicate your residence:
___ Mainland ___ Beach. Are you a ___ Smoker ___ Non-Smoker?
If needed, how many can you house temporarily? ___ Will you accept Pets? ___ Yes ___ No
Dogs _____ Cats _____ Are there any restrictions? Please list: _____
6. Would you be willing to volunteer for a Church of the Palms Emergency Preparedness Action Response Team?
___ Yes ___ No
7. Do you have special equipment, which can be used if necessary, such as a Truck, generator, chain saw, pump, etc.? ___ Yes ___ No Please identify: _____
8. Are you a Ham Operator? ___ Yes ___ No Would you help with communications? ___ Yes ___ No
Would you help Church of the Palms? ___ Yes ___ No Sarasota County Ham Ops. Group? ___ Yes ___ No

Please Note: The COP Emergency Preparedness Program does not replace emergency services provided by the County emergency teams, Red Cross, Salvation Army, FEMA, etc. However, the COP Emergency Preparedness Program is concerned about your welfare and your personal concerns. We are concerned about our church property and the community. We love and care about you.

Please drop off the completed SURVEY FORM at the church office or at the Information Center under the Fellowship Tree, where additional emergency information will be available.