



Block Captain Sign Up Sheet

Last name: _____

First name: _____

House STREET NAME: _____

House NUMBER: _____

CRITICAL

OUR BASIC MISSION REVOLVES AROUND THE IDEA THAT WE CAN HELP PROTECT THE SAFETY AND WELFARE OF OURSELVES AND OUR COMMUNITY...THIS INVOLVES HELPING TO AVOID INJURY AND PRESERVE LIFE. WE MUST BE ABLE TO COMMUNICATE QUICKLY WITH EACH OTHER IN ORDER TO BE EFFECTIVE. PLEASE PROVIDE THE FOLLOWING INFORMATION SO WE NEED CAN FUNCTION AS A GREAT TEAM.

PLEASE WRITE CAREFULLY!

Best Contact Phone Number: _____

Cell Phone Number: _____

Cell Phone Service Provider: _____

Email Address: _____

Does your Cell Phone Service Provider give you text messaging Capability? (Yes or No)_____

Do you know how to send and receive Cell Phone Text messages? (Yes or No)_____

Are you able and willing to check your email at least once a day? (Yes or No)_____

Cell text messaging will be a very important way for us to share urgent and time critical information between ourselves. Please check with your cell phone service provider to get instructions on how to use the service. We will also try to match you up with another block captain who has the same carrier as you to help you if you wish.