

New Canaan CERT

Training Application

I would like to register for the eight-session CERT Basic Training offered online during the fall of 2020. Please sign me up for:

_____ Tues/Thurs evenings _____ Sat/Sun mornings

Name:

Street Address:

City:

State:

Zip:

Home Phone

Cell

Email at which you want to receive CERT information:

Please email this completed form as an attachment to:
certleader@newcanaancert.org

**FOR MORE INFORMATION ABOUT THE NEW CANAAN CERT PROGRAM, PLEASE VISIT
WWW.NEWCANAANCERT.ORG**