

We respect your privacy. We are collecting this medical information to facilitate our ability to assist you in an emergency. We will keep the information in a central location with somewhat limited access until it is needed, although it is not locked up or particularly secure. In an emergency instance this information would be available to (perhaps all) the responders, who could then determine and communicate your needs and administer first aid (the first responders will almost certainly not be EMTs or highly trained in medical procedures, but may be unable to help if no medical information is available).

As the above information could be subject to change, we will have to ask you to confirm or update the information at the time we administer aid, if you are able to provide it.

If you wish to keep your medical conditions private, please indicate so in the above spaces and indicate how we could obtain it if you are unable to give it to us.

I understand the consequent potential lack of privacy of the above medical information and wish to have it available to you anyway.

_____ (signed and dated)

_____ additional household member
(signed and dated)

Introduction to Irish Beach NEST

There is a Neighborhood Emergency Services Team (NEST) here in Irish Beach. The members are trained in Damage Assessment/Safety and Security, Light Search and rescue, First Aid, Shelter and Special Care, Communications, and Animal Care. There are approximately 14 members that have the special training, but we need more people in the community to participate.

The NEST teams are trained to provide assistance in an emergency but are only dispatched to assess damage to and assist NEST households. Due to liability limits the NEST unit can only provide assistance for which members are trained under NEST-authorized training and only to NEST households.

To be a NEST household, you must complete a NEST household survey and authorize access to your house in the event of a disaster. To make sure that you can get the assistance you will need in the event of an emergency, please sign-up by filling out the household survey. Survey forms can be requested via our new email address ibnestinfo@hughes.net.

The NEST program at Irish Beach is financed by the funds provided through the \$25.00 annual membership fee. The membership fee from each member household is used to purchase the required safety, search and rescue and first aid and communications equipment required. Checks should be made out to Al Thompson (NEST Treasurer); please send your completed survey form and check to Irish Beach NEST, P.O. Box 242, Manchester, CA 95459.

NEST Household must also have an OK/HELP sign that should be displayed (in a location easily visible from the street) in the event of a disaster. This will tell the NEST Team members who are inspecting the community after a disaster occurs whether or not there are people in the house that need help. This sign is only used to report on the status of the people, not the structure. (Damage to structures will be assessed after the people in the community are taken care of.) If you are injured and there is no one who can display the sign, the team will interpret the lack of a sign to mean that help is needed. Therefore, every NEST household is required to obtain the OK/HELP sign. The NEST team has obtained a supply of these signs. The cost to each household is \$5. Please include this \$5 in your membership fee check if you don't already have one of these signs.

NEIGHBORHOOD EMERGENCY SERVICE TEAM REGISTRATION FORM

MAILING ADDRESS:		HOME PHONE:	
		E-MAIL ADDRESS:	
ADULT NAME:		WORK PHONE:	
EMPLOYER:		WORK HOURS:	
ADULT NAME:		WORK PHONE:	
EMPLOYER:		WORK HOURS:	
CHILD'S NAME	AGE	SCHOOL	

EMERGENCY RELEASE INFORMATION

School policy for release of children following a disaster:

The following person(s) are authorized to take custody of my child (children) in the event I (we) are unable to return to them following a major emergency or disaster:

NAME	ADDRESS	PHONE	DRIVER LICENSE #

EMERGENCY MEDICAL INFORMATION

LIST ANY PERSON IN YOUR FAMILY WHO HAS SPECIAL MEDICAL NEEDS OR REQUIREMENTS

NAME	NEEDS, CAUTIONS, ALLERGIES

EMERGENCY CONTACT

The following persons may be contacted in the event of an emergency and I (we) are unable to do so because of injury or other incapacitation:

NAME:	RELATIONSHIP:
ADDRESS:	PHONE:

NAME:	RELATIONSHIP:
ADDRESS:	PHONE:

PETS

TYPE	NAME	USUAL LOCATION

SPECIAL INSTRUCTIONS:

PERMISSION TO ACT

IN THE EVENT NO ONE IS AT HOME AT THE TIME OF AN EMERGENCY OR DISASTER, I GIVE PERMISSION TO THE NEXT GROUP TO ACCESS THE HOUSE TO SHUT OFF ANY/ALL UTILITIES THAT ARE DAMAGED, OR NEED TO BE TURNED-OFF FOR THE SAFETY OF THE BUILDING OR THE AREA.

SIGNATURE OF RESPONSIBLE ADULT: _____ DATE: _____

SIGNATURE OF RESPONSIBLE ADULT: _____ DATE: _____

SPECIAL NOTES

INDIVIDUAL SKILLS

Please enter the names of those in your household or group who have been or would like to be trained in the following skills:

SKILL	NAME OF PERSON TRAINED	CERTIFICATE EXPIRES	NAME OF PERSON WANTING TO BE TRAINED
FIRST AID/CPR			
SEARCH + RESCUE			
DAMAGE ASSESSMENT			
SHELTER OPERATIONS			
CRISES COUNSELING			
AMATEUR RADIO			
OTHER			
COMMUNICATIONS			
FIRE FIGHTING			
SECURITY + SAFETY			
PLANNING			
LOGISTICS			
OTHER:			

Please check the services you would be willing to provide in times of emergencies:

SERVICE	SERVICE
EMERGENCY HOUSING	CUT/CLEAR TREES
EMERGENCY FEEDING	PICK AND SHOVEL WORK
CONSTRUCTION, CARPENTRY	ELECTRICAL
PLUMBING	SAND BAGGING
PARTICIPATE IN PHONE TREE	TRANSLATION Language:
STRESS MANAGEMENT	CHILD CARE
TRANSPORTATION	OTHER:
EMERGENCY CLEAN-UP	

RESIDENCY INFORMATION

FULL TIME RESIDENCE IN IRISH BEACH?	
VACATION RESIDENCE?	
VACATION RENTAL?	
OTHER:	

UTILITIES AND ACCESS

LOCATION OF PROPANE SHUT-OFF	
LOCATION OF WATER SHUT-OFF	
LOCATION OF ELECTRICAL BREAKER BOX	
NAMES OF OTHERS IN IRISH BEACH WHO HAVE ACCESS TO YOUR HOUSE AND TYPE OF ACCESS:	

VACATION RENTAL INFORMATION

RENTAL CONTACT NAME:	
RENTAL CONTACT TELEPHONE NUMBER:	

WOULD YOU BE WILLING TO PROVIDE EACH RENTER OR VISITOR STAYING IN YOUR HOME WITH AN EMERGENCY INFORMATION SHEET?

YES _____ NO _____

If you have any questions, contact ibnestinfo@hughes.net or call Su Whitaker at 707-882-1992.

Please mail your completed and signed survey form, as well as your check made out to Al Thompson (NEST) to:

Irish Beach NEST
 PO Box 242
 Manchester, CA 95459

Emergency Supplies Checklist

Stocking up now on emergency supplies can add to your safety and comfort during and after an earthquake or other disaster. Assemble and store enough supplies for at least 72 hours. A week or more is better.

Essentials

- Water* - 1 gallon per person/day
- Water purification kit*
- Food**
- Manual can opener
- First aid kit, freshly stocked
- First aid book
- Change of clothing
- Blankets or sleeping bags
- Portable radio, flashlight and spare batteries
- Essential medications
- Extra pair of eyeglasses
- Extra set of house and car keys
- Fire extinguisher — A-B-C type
- Special items for infants, children, elderly and disabled
- Pet supplies: food, water and restraint (leash or carrier)
- Cash and coins, credit card
- An ID for each person to wear; emergency contact names and numbers
- Copies of vital documents (birth certificates, licenses, insurance policies, credit cards, etc.)

Sanitation Supplies

- Large plastic trash bags to use for waste, shelter, or rain ponchos
- Large trash cans
- Bar soap and liquid detergent; waterless soaps or 'wipes'
- Shampoo
- Toothpaste and toothbrushes
- Feminine hygiene supplies
- Toilet paper; tissue
- Household bleach with no additives

Safety and Comfort

- Sturdy shoes
- Heavy gloves for clearing debris
- Candles and waterproof matches***
- Communication kit: paper, pens, stamps
- Tent
- Whistle
- Toys, games, cards, books, puzzles

- continued on reverse -

Cooking

- Plastic knives, forks, spoons
- Paper plates and cups
- Paper towels
- Heavy-duty aluminum foil, plastic wrap, zip bags
- Grill, camp stove, chafing dish and cooking fuel***

Tools and Supplies

- Axe, shovel, broom
- Adjustable wrench to turn off gas
- Tool kit with screwdriver, pliers, hammer, scissors
- Coil of 1/2" rope
- Garden hose for siphoning and firefighting
- Fire extinguisher (A-B-C type)
- Utility knife
- Duct tape; plastic sheeting
- Dust mask
- Area map

***Water**

- Store a gallon of water per person per day; plan for at least 3 and preferably 7 days.
- Seal water containers tightly in a clean food-grade plastic container, label them with a date, and store in a cool, dark place.
- Rotate water supplies every 6 months.
- Keep a small bottle of unscented liquid bleach to purify water.

If you have concerns about your water safety do one of the following:

- Boil water for at least 5 minutes, let cool, then drink or use to prepare food.
- Add 8 drops of unscented liquid bleach to each gallon of water. Shake or stir, then let stand 30 minutes. A slight chlorine taste and smell is normal.

If you run out of stored drinking water, strain and treat water from your water heater. To strain, pour it through a clean cloth or layers of paper towels. Treat, following the directions above.

****Food: Recommended Foods Include:**

- Ready-to-eat canned meats, fruits and vegetables
- Canned juices, milk and soups
- High-energy foods like peanut butter, jelly, crackers, granola bars and trail mix
- Comfort foods such as hard candy, sweetened cereals, candy bars and cookies
- Dried foods (avoid those with high salt content)
- Instant meals that don't require cooking or water
- Don't forget to include a manual can opener!

*****Grills and camp stoves (and cooking fuel) are for OUTDOOR use only!**

Before using fire to cook, or lighting matches or candles, make sure there are no gas leaks.