

Household Information Data Collection Form

Street Address: _____

Adult Name(s): _____

Children Name(s) and Age(s): _____

Phone(s): _____

Email: _____

Pet(s) and Type(s): _____

Any person with specific needs: _____

Emergency Contact Name & Phone #: _____

Do you work off island? (circle one) Yes No

In an emergency, this property offered for: _____ Communication Post, _____ Child Care, _____ First Aid
 _____ Warming room, _____ Spare room overnight

✓	Skills Description	Comments
	Carpentry	
	Cars/Mechanics	
	Child Care	
	Climbing	
	Computer/IT	
	Cooking (Group)	
	Coordinating/Leadership	
	Crisis Counseling	
	Diving	
	Driving in the snow/ice	
	Elder Care	
	Electrical	
	Firefighting	
	First Aid/CPR	
	Heavy Equipment Operator	
	Ham Radio Operator	
	Hunting & Fishing	
	Kayaking	
	Motors	
	Plumbing	
	Radio Communications	
	Rigging	
	Search & Rescue	
✓	Equipment Description	Comments
	Barbecue/Grill	
	Bedding (Spare)	
	Boat	
	Camp Stove	

✓	Equipment Description	Comments
	Carpentry Tools	
	Chainsaw	
	Computer	
	Crowbar	
	Extension Cord	
	Fire Extinguisher	
	Fireplace (Firewood)	
	First Aid Supplies	
	Flashlight/Lanterns	
	Food/Water (Stored)	
	Generator	
	Ham Radio	
	Hard Hat	
	Kayak/Paddleboard	
	Ladder	
	Leather Gloves	
	Matches	
	NOAA Weather Radio	
	Plumbing Tools	
	Propane Heater	
	Propane Cook Stove	
	Rain Barrel	
	Sleeping Bags	
	Strong Rope	
	Sturdy Shoes	
	Tent	
	Walkie Talkie	
	Woodstove	

By submitting this form to your MYN Captain, you agree to share your contact info with your neighborhood for emergency planning purposes