Appendix A
CHURCH MEMBER
DISASTER RESPONSE INTEREST AND SKILLS SURVEY

Name: ____________________________________________
Street Address: ____________________________________ Home Phone: ____________________________
City/State/Zip: ____________________________________ Work Phone: ____________________________
E-mail: __________________________________________ Cell Phone: ____________________________
Church: __________________________________________ Church Phone: __________________________
Church Address: __________________________________

Would you be interested in assisting with a disaster relief project by our church? ☐ In this community?
☐ In this county? ☐ Within the Presbytery? ☐ In this state? ☐ In the USA? ☐ Internationally?

How much lead-time would you need to get ready to participate in a project? __________________________

INTEREST/EXPERIENCE/TRAINING
Check the disaster ministries that interest you. Place two checks by areas where you are experienced.

___ Advisory/advocacy  ___ Driver  ___ Reconstruction team
___ Bulk distribution  ___ Elderly care  ___ Repair (emergency)
___ Caring for pets  ___ Employment assistance  ___ Resources/logistics
___ Casework  ___ Evacuation of persons  ___ Safety
___ Chainsaw crew/tree removal  ___ General handyman  ___ Salvage
___ Child care  ___ Housing coordinator  ___ Sanitation
___ Cleanup crew/debris removal  ___ Interpreter/translator:  ___ Shelter management or care
___ Clerical assistant  ___ (including Ham Radios)  ___ Site manager
___ Communications  ___ Legal aid  ___ Special needs care
___ ___ Meal preparation  ___ Transportation
___ (including Ham Radios)  ___ ____________  ___ Other ________________
___ Computers  ___ Medical emergency team  ___ ____________
___ Counseling  ___ Prayer team coordinator  ___ ____________
___ Damage assessment  ___ Procurement  ___ ____________

Check if you have specialized training in the following (please add comments below):
___ Advanced first aid and CPR  ___ Heavy equipment operator
___ Bricklayer  ___ Mass Feeding
___ Carpentry  ___ Nurse
___ Chaplain  ___ Paramedic
___ Crisis counseling  ___ Physician
___ Disaster relief  ___ Plumbing
___ Dry walling/Painter  ___ Roofer
___ Electrician  ___ Safety
___ Emergency child care  ___ Other ________________
___ Evangelism
___ General contractor
The following may be available during disaster response in or near our community:

### Church Facilities
- ___ Classrooms
- ___ Dining room
- ___ Dumpster
- ___ Fellowship hall
- ___ Food bank
- ___ Gymnasium
- ___ Ice makers
- ___ Kitchen
- ___ Nursery
- ___ Outside electric hookup
- ___ Outside sewage hookup
- ___ Outside water hookup
- ___ Refrigerators/freezers
- ___ Rest rooms
- ___ Showers
- ___ Storage/vacant buildings
- ___ Other ________________

### Communication Equipment
- ___ Cell phones
- ___ Ham Radios
- ___ Satellite phones
- ___ Other ________________

### Equipment
- ___ Air compressors
- ___ Chainsaws, etc.
- ___ Generators
- ___ High volume pumps
- ___ Oxygen tanks
- ___ Portable stoves
- ___ Power painters
- ___ Power washers
- ___ Sanitation equipment/supplies
- ___ Submersible pumps
- ___ Other ________________

### Vehicles
- ___ 4x4’s
- ___ Aircraft
- ___ ATVs
- ___ Back hoes
- ___ Boats
- ___ Bobcats
- ___ Buses
- ___ Campers/RVs
- ___ Cargo Trailers
- ___ Dump trucks
- ___ Front loaders
- ___ Portable showers
- ___ Tractor-trailers
- ___ Flat bed trailers
- ___ Trucks
- ___ Vans
- ___ Other ________________

### Construction Supplies
- ___ Electrical
- ___ Hardware
- ___ Lumber
- ___ Plumbing

### Medical Supplies
- ___ Crutches
- ___ First-aid kits
- ___ Medical supplies
- ___ Wheelchairs
- ___ Other ________________

### Supplies
- ___ Cots
- ___ Drinking Water
- ___ Ice
- ___ Non-perishable food
- ___ Sanitizing liquids
- ___ Tarps
- ___ Tents
- ___ Other ________________

### Tools
- ___ Brooms/mops
- ___ Electric extension cords
- ___ Garden hoses
- ___ Hand tools
- ___ Paint brushes/rollers
- ___ Power tools
- ___ Rakes
- ___ Shop vacuums
- ___ Shovels
- ___ Other ________________
After listing the officials, list any church members or friends who may work in a particular office or agency. Sometimes, the personal contact is helpful.

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<thead>
<tr>
<th>Title</th>
<th>Name</th>
<th>Contact Information</th>
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<tbody>
<tr>
<td><strong>ORTHODOX PRESBYTERIAN CHURCH</strong></td>
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<tr>
<td>OPC Disaster Response Coordinator</td>
<td>David Nakhla</td>
<td>(562) 760-7606 <a href="mailto:opcdisasterresponse@opc.org">opcdisasterresponse@opc.org</a></td>
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<tr>
<td>Presbytery Disaster Preparedness &amp; Response Committee Chairman</td>
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<td>Presbytery Disaster Response Coordinator</td>
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<td>Presbytery Disaster Response Alternate Coordinator</td>
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<td>Local Church Disaster Response Coordinator</td>
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<td><strong>STATE GOVERNMENT</strong></td>
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<td>Office of Public Safety or Emergency Management</td>
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<td>Area Coordinator</td>
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Appendix D
FAMILY DISASTER INFORMATION

Last Reviewed by: _______________ Date: __________

Family Name: ________________________________
Street Address: ______________________________ Home Phone: __________________
City/State/Zip: ______________________________ Work Phone: __________________
E-mail (primary): ____________________________ Cell Phone (primary): ____________
E-mail (secondary): __________________________ Cell Phone (secondary): __________
Church (Name, City, State): ____________________ Church Phone: ________________
Names and ages of persons living in the home: ________________________________
Pets: ☐ No / ☐ Yes – names and breed: _______________________________________
Persons requiring special needs care: ________________________________________
Describe level of care: ___________________________________________________
Map from the church on file: ☐ No / ☐ Yes – Date last reviewed: ________________
Closest Neighbor – Name: ___________________________ Cell Phone: ______________
Closest Neighbor – Address: ___________________________ Distance from your home: ___________
Church member (outside your own household) who lives the nearest to you:
Name: ___________________________ Address: ______________________________
Closest Relative – Name: ___________________________ Cell Phone: ______________
Closest Relative – Address: ___________________________ Home Phone: _____________

Disaster Preparation Assets on Hand at Home.

• City Water: ☐ No / ☐ Yes - Details: __________________________________________
• Well Water: ☐ No / ☐ Yes - Details: __________________________________________
• Gas: ☐ No / ☐ Yes - Details: ________________________________________________
• Electric: ☐ No / ☐ Yes - Details: _____________________________________________
• Back up power generation: ☐ No / ☐ Yes - Details: _____________________________
• Four wheel drive equipment: ☐ No / ☐ Yes - Details: ___________________________
• Boat with motor: ☐ No / ☐ Yes - Details: ______________________________________
• Ham radio: ☐ No / ☐ Yes - Details: __________________________________________
• Storm Cellar: ☐ No / ☐ Yes - Details: _________________________________________
• Chain saws: ☐ No / ☐ Yes - Details: __________________________________________
• Underground fuel cells: ☐ No / ☐ Yes - Details: ______________________________
• All-terrain vehicles: ☐ No / ☐ Yes - Details: _________________________________