## **Appendix One**

## **Personal and Medical Information Form for Volunteers**

Volunteers are requested to provide the following information to their convention's disaster relief director and to give to the unit director upon arrival at the disaster work location.

Name	E-mail		
Address			
Home Phone	_ Work Phone	Cell Phone	
Occupation	Date of Birth		
Marital Status	Spouse's Name		
Address			
Phone			
Emergency Contacts (please	list two people)		
Name	Relationship		
Address			
Home Phone	Work Phone	Cell Phone	
Name	Relationship		
Address			
Home Phone	Work Phone	Cell Phone	
Health Information			
Physician's Name		Phone	
Health Insurance Company _			
Group/Policy	Insurance Phone		
Medications			
Allergies	Marin		
Symptoms			
Other Information			
www.mex.senewinited.			
Social Security No			
Driver's License No.			
Auto Insurance Company	Policy No		
Carlicense No		State	

## **Appendix Five**

## What to Take Checklist

Devotional Materials				
Bible and devotionals	Spiritual Preparation	n for Disaster Relief		
Hope in Crisis tracts	Witnessing tracts			
Identification				
Disaster relief ID		Vehicle registration		
Phone numbers (family phy	rsician, employer, church, emerg	ency contact)		
	pany, policy number, coverage,	agent, and phone)		
Health Automobi	ile Life			
Miscellaneous Items				
Money or traveler's checks	(\$50-200)Notebook a	nd pencils or pens		
Southern Baptist disaster re	elief manual and/or convention o	disaster relief manual		
Clothing (4-7 day supply)				
Disaster relief caps and jackets Work shoes				
Coats and/or jackets (warm and cool) Waterproof footwear				
Jeans or work pants		ay; white, wool or wool blend)		
Shirts (warm and cool weat	ther) Work glove	es		
Underwear	Rain suit or	poncho		
Sleepwear	Bandanas a	and handkerchief		
Sneakers	Laundry ba	g		
New prescription orders (ifNonprescription drugsBar soapDeodorantTowelsToothbrushShampoo and rinseChap stickDiarrhea cureInsect sprayA&D ointment	by name all your prescription me your physician approves and willAllergy kit: bees, etcLiquid antibacterial soapFeminine needsWashclothsToothpasteComb and brushShaving creamAntacidsSkin lotionAntifungal ointment/spray	write new prescriptions)Sunblock (15+)		
Food Diet food	Snacks	Drinking water		
DIECTOOG	SHBCKS			
Supplies and Equipment				
Flashlight or lantern	· ·			
Watch or clockTent (optional, inquire first)				
Canteen or water bottle				
	need for health, safety, or comfo	ort		