**VILLAGE & TOWN OF GREEN ISLAND
ALERT NOTIFICATION CONTACT REQUEST FORM**
***Please fill in ALL data that applies to your household***

|  |  |  |
| --- | --- | --- |
| NAME OF INDIVIDUAL |  | BUSINESS NAME |
|  |  |  |
| STREET ADDRESS | APT | CITY/STATE/ZIP |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| Children in household | YES | NO |
| Disabled in household | YES | NO |
| Medical equip in household | YES | NO |
| Pets in household | YES | NO |

***Please list ONLY the means of contact you want used – notifications will be sent to ALL***

|  |  |
| --- | --- |
| Home Phone |  |
| Primary Cell Phone |  |
| Primary Text Message |  |
| Secondary Cell Phone |  |
| Secondary Text Message |  |
| Work Phone |  |
| Primary Email Address |  |
| Secondary Email Address |  |

***Check off ONLY the notifications you wish to receive***

|  |  |
| --- | --- |
| All emergencies | MANDATORY |
| Evacuations | MANDATORY |
| Amber Alert/Missing Adult | MANDATORY |
| Planned electrical outage |  |
| Planned water/sewer outage |  |
| Call for volunteers |  |
| Street closing |  |
| Snow Removal |  |
| Street cleaning |  |
| Hydrant flushing |  |
| GIG change |  |
| Senior Citizens events |  |
| Community events |  |
| Recreation activities and changes |  |

**Please return this form to:
Village of Green Island, 20 Clinton Street, Green Island, NY 12183**