

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 18 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and submitting the form. This collection of information is voluntary. You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing the burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 1800 South Bell Street, Arlington VA 20598-3005, Paperwork Reduction Project (1660-NEW). NOTE: DO NOT SEND YOUR COMPLETED FORM TO THIS ADDRESS.

PRIVACY ACT STATEMENT

AUTHORITY: The Robert T. Stafford Disaster Relief and Emergency Assistance Act as amended, § 201, 42 U.S.C. § 5131; Reorganization Plan No. 3 of 1978; and Presidential Policy Directive (PPD) – 8, National Preparedness, dated March 30, 2011.

PRINCIPAL PURPOSE(S): This information is being collected for the primary purpose of registration of an individual or organization to access the Community Drill Day website. Additionally, information may be used for contact purposes by FEMA and other registered users, and to assess the capabilities and readiness of the registrant for disaster response.

ROUTINE USE(S): The information on this form may be disclosed as generally permitted under 5 U.S.C. § 552a(b) of the Privacy Act of 1974, as amended. This includes using this information as necessary and authorized by the routine uses published in DHS/ALL-004 - General Information Technology Access Account Records System (GITAARS) System of Records, 74 Fed. Reg. 49882 (Sept. 29, 2009); and upon written request, by agreement, or as required by law.

DISCLOSURE: The disclosure of information on this form is voluntary; however, failure to provide the information requested may prevent registration to the site and receipt of information from FEMA and other registered users of the site.

FEMA Form Number: 008-0-8



**Section I: Registering for Individual or Organization**

I/We will participate in the Community Drill Day on October 17, 2013.  Yes  No

I am registering for:  
*(If under 18, ask a parent to register)*

Please select one

- Myself/Family
- School/ College/University/Childcare Center
- Organization/Department/Agency

If you selected **“My school, college/university, or childcare center:”** Review this list and select the appropriate category of school. Choose an item.

Please select one

- Childcare/pre-schools
- K-12 schools/districts
- Colleges/universities

How many schools or sites are you registering to participate?

How many staff including employees, volunteers, parents, etc. will participate?

Please select the number of students will participate?

The question below help us understand how these populations participate in drills

How many of your participants have disabilities of access/functional needs?  
*(Access/functional needs include mobility, hearing, sight, speech, cognitive, developmental, mental, etc.)*

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## Section I: Registering for Individual or Organization

Select the other groups you belong to: *(Use Ctrl + Shift or Ctrl for multiple selections)*

Access/Funtional/Disability Needs Organizations	▲
Business/ Industry Associations	
CERT Groups	
Childcare and Preschool	▲
Citizen Corps Council	
Colleges/Universities	
Communication Groups	
Congressional	
Media Organizations	▼

What communication channels do you plan on using to connect with potential participants? *(Please check all that apply.)*

- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> Website      | <input type="checkbox"/> Phone   |
| <input type="checkbox"/> Email        | <input type="checkbox"/> Meeting/Event                                       |
| <input type="checkbox"/> Radio/TV     | <input type="checkbox"/> Other <i>(Please specify):</i> <input type="text"/> |
| <input type="checkbox"/> Newspaper    | <input type="checkbox"/> Not sure  |
| <input type="checkbox"/> Flyer        |  |
| <input type="checkbox"/> Newsletter   |  |
| <input type="checkbox"/> Direct Mail  |  |
| <input type="checkbox"/> Social Media |  |

What tools would you be interested in for promoting to potential participants? *(Please check all that apply.)*

- |  |  |
|--|--|
| <input type="checkbox"/> Fact sheets or tip sheets | <input type="checkbox"/> Media advisories  |
| <input type="checkbox"/> Posters/Flyers            | <input type="checkbox"/> Language to post on my website                                  |
| <input type="checkbox"/> Audio recordings          | <input type="checkbox"/> Language to post on my Facebook page or other social media site |
| <input type="checkbox"/> Videos                    | <input type="checkbox"/> Articles for my newsletters                                     |
| <input type="checkbox"/> Web banners               | <input type="checkbox"/> A mobile application  |
| <input type="checkbox"/> Postcards                 | <input type="checkbox"/> Other <i>(Please specify):</i> <input type="text"/>             |
| <input type="checkbox"/> Drill Manuals             |  |

**The question below helps us understand how confident you are in your and your school's ability to respond to a disaster.**

How confident are you in your and your school's ability to know what to do ? Please use a scale of 1 to 5, with 5 being "very confident" and 1 being "not at all confident."

- 1 In the first five minutes of a terrorist act such as an explosion of a radiological or dirty bomb?
- 2 In the first five minutes of a hazardous materials accident such as the release of a chemical agent?
- 3 In the first five minutes of a sudden natural disaster such as an earthquake or tornado that occurs without warning?
- 4 In a highly contagious disease outbreak such as H1N1?
- 4 In a weather emergency such as a hurricane or major snowstorm?
- 5 In a wildfire?
- 5 In a flood?



## Section II: Contact Information

Organization Name:

Department:

What are you registering? **Please select one**

What is your job title?

- The participation of my organization
- The participation of my department
- Subset of my organization

Name (First and Last):

City:

State:

Zip Code:

Phone Number (optional):

Would you like to receive a text alert at the time of the drill?  Yes  No

Email:

Choose a password:

*Your Password should be between 8 and 16 characters and will be case sensitive.*

Repeat password:

Time Zone:


[Section III>>](#)

 **Section III: Participation**

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What type of hazard will you drill on October 17, 2013?

**Please select one** ▼

- Earthquake
- Hazardous materials/Terrorism
- Icestorm** 

What drill-related activities are you participating in? *(Please check all that apply.)*

Drill/ Exercise

Preparedness Discussion

Tabletop or simulation activity

[Section IV>>](#)

○—○—○—●—○ **Section IV: Permissions and Next Steps**

By agreeing to add your **Please select one**

- Myself/Family
- School/College/University/Childcare Center**
- Organization/Department/Agency

on the Community Drill Day website, you will be listed among millions of participants from across the country who are voluntarily taking part in a drill activity to build and sustain national preparedness and enhance national resilience.

Would you agree to list your name/organization on our website as a participant?  Yes  No

How do you want to be listed? (i.e. American Red Cross of Alabama, American Red Cross, or Self)

Would you like to receive messages from the Ready Campaign?  Yes  No

Can we send you e-mail updates about the Community Drill Day?  Yes  No

Can we contact you after Community Drill Day to learn about your experience?  Yes  No

Would you like to sign up to be a National Coalition Member?  Yes  No

*If you click yes, you will be brought to a page at the end of this registration to finalize your coalition membership. Becoming a coalition member will give you access to log in information and allow you to update your drill profile at any time for this event and future events. The coalition also offers exclusive resources and discussion boards for members.*

Do you allow the name of your organization to be used in materials about National Preparedness, including listed on the website or in other materials?  Yes  No



## Section V: Other Preparedness Activities

Have you participated in an **Icestorm** drill before?  Yes  No  Not Sure

What makes you want to participate in Community Drill Day? *(Please check all that apply.)*

- |   |  |
|---|--|
| <input type="checkbox"/> I want to know what to do during an actual emergency in my community   | <input checked="" type="checkbox"/> A friend, family member, or trusted leader encouraged me to take steps to become better prepared |
| <input type="checkbox"/> I experienced an emergency or learned about disasters in other places, and it motivated me to become better prepared | <input type="checkbox"/> Other <i>(please specify)</i> : <input type="text"/>  |
| <input type="checkbox"/> My job or school encouraged me to take steps to become better prepared   | <input type="checkbox"/> Don't Know  |

I affirm to one or more of the following:

- Learn the emergency I am at risk of and their appropriate responses
- Create an emergency supply kit (or update existing kit)
- Create an emergency plan (or update existing plan)
- Volunteer, attend preparedness training or host a preparedness event in my community

I am going to help others prepare by coordinating:

- |  |   |
|--|---|
| <input type="checkbox"/> A drill           | <input type="checkbox"/> Assembling kits                                      |
| <input type="checkbox"/> Creating plans    | <input type="checkbox"/> Understanding risks                                  |
| <input type="checkbox"/> Training sessions | <input type="checkbox"/> An awareness campaign                                |
| <input type="checkbox"/> I'm not sure yet  | <input type="checkbox"/> Other <i>(please specify)</i> : <input type="text"/> |

In addition to your drill, have you participated or do you plan on participating in any of these activities over the next 6 months? *(Please check all that apply.)*

### Participated Activities

- Created or updated emergency plans
- Created or updated disaster supplies kits
- Participated in first aid classes or community response team trainings
- Took mitigation measures to secure home or building to prevent damage or injury
- Practiced evacuating home or buildings
- Tested communications plans
- Simulated emergency response procedures
- Conducted a tabletop exercise
- Developed a Continuity of Operations Plan
- Planned for data storage and/or internet security
- Other *(Please specify)*:

### Will Participate Over the Next 6 Months?

- Creating or updating emergency plans
- Creating or updating disaster supplies kits
- Participating in first aid classes or community response team trainings
- Will take mitigation measures to secure home or building to prevent damage and injury
- Practicing evacuating buildings
- Testing communications plans
- Simulating emergency response procedures
- Developing a Continuity of Operations Plan
- Planning for data storage and/or internet security
- Conducting a tabletop exercise
- Other *(Please specify)*:

Next >>



## Section V: Other Preparedness Activities

How did you learn about Community Drill Day? *(Please check all that apply.)*

- |   |  |
|---|--|
| <input type="checkbox"/> A social media group, forum, or discussion board                             | <input type="checkbox"/> A colleague at work                                 |
| <input type="checkbox"/> A leader from my faith-based organization                                    | <input type="checkbox"/> An administrator at my or my child's school         |
| <input type="checkbox"/> A leader from an organization within my community                            | From a local government spokesperson   |
| <input type="checkbox"/> Through conversations with neighbors, friends, or family (online or offline) | <input type="checkbox"/> From a national government spokesperson             |
|   | <input type="checkbox"/> Other <i>(Please specify):</i> <input type="text"/> |

Where did you hear about Community Drill Day? *(Please check all that apply.)*

- |   |   |
|---|---|
| <input type="checkbox"/> On national TV                               | <input type="checkbox"/> Through conversations with neighbors, friends, or family (online or offline) |
| <input type="checkbox"/> On local TV                                  | <input type="checkbox"/> At work, if appropriate  |
| <input type="checkbox"/> On the Internet                              | <input type="checkbox"/> From your child's school, if appropriate                                     |
| <input type="checkbox"/> Through e-mail                               | <input type="checkbox"/> From your school, if appropriate   |
| <input type="checkbox"/> On the radio                                 | <input type="checkbox"/> From FEMA  |
| <input type="checkbox"/> In the newspaper                             | <input type="checkbox"/> From a local government entity or spokesperson                               |
| <input type="checkbox"/> On social media                              | <input type="checkbox"/> On the Ready.gov website   |
| <input type="checkbox"/> At church or from a faith-based organization | <input type="checkbox"/> Not Sure   |
| <input type="checkbox"/> From a community organization                | <input type="checkbox"/> Other <i>(Please specify):</i> <input type="text"/>                          |

Have you signed up for your community's alerts and warning systems?

- Yes       No       Not sure

In your community are you aware of any other groups participating in the drill? *(Please check all that apply.)*

- My Child/Children's' School
- Local College/University
- My Faith-based organization
- Local community organization(s) I am a member
- My Workplace
- Local Business
- Other *(Please specify):*

[Click here](#) for more resources related to preparedness drills.

[Click here](#) to share this registration page with others.

Terms and Conditions

- You must click this box to say that you have read and accepted the site's terms and conditions.

**SUBMIT**