



Mailing Address : PO Bag 89, Couva Post Office, Couva.

YEAR _____

MEMBERSHIP APPLICATION / RENEWAL FORM

FORM #001

NAME OF MEMBER/PROSPECTIVE MEMBER :	
ADDRESS OF MEMBER :	
NAME OF CHIEF EXECUTIVE OFFICER :	

REPRESENTATIVE :		ALTERNATE :	
DESIGNATION :		DESIGNATION :	
TELEPHONE NO. :		TELEPHONE NO. :	
PAGER :		PAGER :	
FAX NO. :		FAX NO. :	
E-MAIL :		E-MAIL :	

- Annual Membership Fee is \$2000.00 (full member) or \$1000.00 (associate) payable by 31st January each year
- Make cheques, draft, etc. payable to Trinidad and Tobago Emergency Mutual Aid Scheme
- Complete form and promptly return with payment to TTEMAS
- All Member agree to maintain resources to meet likely emergencies
- Members shall be bound by TTEMAS Bye-Laws

NATURE OF BUSINESS :	
NO. OF EMPLOYEES :	
MAJOR HAZARDS :	

FOR OFFICIAL USE	
MEMBER CATEGORY	
- Full/Corporate	- Associate/Government Agency/Statutory Body
- Honorary	- Non Profit
	- Protective Service

PLEASE SEE OVERLEAF

EMERGENCY MUTUAL AID RESOURCE LISTING

RESOURCE	AVAILABILITY
1. Ambulance (specify type)	
2. Extricating Tools	
3. Trauma Kits, Resuscitators, Stretchers	
4. Fire Truck <ul style="list-style-type: none"> - Water - Water/Foam - Dry Chemical - Water/Foam/Dry Chemical 	
5. HAZMAT Trailer	
6. Foam (Type / % / Amt.)	
7. Foam Trailer	
8. Foam Eductors	
9. Portable Monitors	
10. Water Pumps	
11. Hoses (Size/Amt./Thread)	
12. Hard Suction Hose	
13. Large Diameter Hose	
14. SCBA's	
15. SCBA's Spare Bottles	
16. Portable Cascade Air Supply	
17. Auxiliary Lighting Plants	
18. Oxygen Analyzers/Explosimeters	
20. Absorbent Pillows/Booms	
21. Emergency Radio Communications	
22. Current Tested Emergency Response Plan	
23. Personnel Available & Times	
24. Other Equipment /Materials	

Authorized Signature

Type/Print Name

Designation

Date