

**Westshore Regional CERT  
Website Member Story Form**

Name of Submitter: \_\_\_\_\_ Date: \_\_\_\_\_

Unit/City: \_\_\_\_\_ Email: \_\_\_\_\_

Member Story Submittal for  Self  Other: \_\_\_\_\_

Background (Life highlights, education, accomplishments, occupation, family, history in Westshore, etc.):

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Recreation (Hobbies, special skills & abilities, pets, travel, art, etc.): \_\_\_\_\_

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History with WSC (Length of membership, why you/they chose to join, service at emergency and non-emergency events, special training, instruction, donations, other efforts on behalf of the team, etc.):

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Future goals: \_\_\_\_\_

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Picture Submitted? \_\_\_\_\_

*\* Use reverse side of form, if needed \**

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**For office use**

Photo added: \_\_\_\_\_ Month/Year Featured: \_\_\_\_\_