



Volunteer Interest Information Card

Name _____

Address _____

Mountain Resident? ____ Full-Time ____ Part-Time ____ Non-Resident

Phone _____ Email _____

Certifications:

Driver's License Number _____ State _____

Driver's License Class ____ Endorsements/Restrictions _____

Fire _____

EMS _____ SNHD# _____ NREMT# _____

Other Certifications _____

Submit completed form to MCFPD@clarkcountynv.gov