



Berkeley-Morgan County Health Alerts & Public Education Information Sign-up Form

Name: _____ (include any prefix or suffix)

Organization Name: _____

Primary Address Line 1: _____

Primary Address Line 2: _____

City: _____ State: _____

Zip Code: _____ County: _____

Website: _____ (if applicable)

Contact Method:

The system will not allow two accounts with the same email address, phone and/or fax number.

If you belong to an organization in which the fax or phone number would already be registered, please advise the name of the organization.

Existing Organization's Name: _____

*** To receive Health Alerts, public health education information and other system related issues, you must enter an email and/or a fax number as a contact method. Please enter the number which you prefer to use to receive communications & make the type of communication for that number. You may list up to three email addresses and up to six different contact methods.

Email 1. _____ @ _____

Email 2. _____ @ _____

Email 3. _____ @ _____

Contact Method 1: ____ - ____ - ____ ext. ____ home work cell fax SMS/text pager

Contact Method 2: ____ - ____ - ____ ext. ____ home work cell fax SMS/text pager

Contact Method 3: ____ - ____ - ____ ext. ____ home work cell fax SMS/text pager

Contact Method 4: ____ - ____ - ____ ext. ____ home work cell fax SMS/text pager

Contact Method 5: ____ - ____ - ____ ext. ____ home work cell fax SMS/text pager

Contact Method 6: ____ - ____ - ____ ext. ____ home work cell fax SMS/text pager

 Email completed forms to: jschetrompf@berkeleywv.org or

 Mail to: Berkeley-Morgan County Board of Health

Attn: TP Coordinator

122 Waverly Court

Martinsburg WV 25403