

MCDONALD COUNTY EMERGENCY MANAGEMENT  
MCDONALD COUNTY SHERIFF'S OFFICE  
HOME STORM SHELTER REGISTRATION

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TOWN: \_\_\_\_\_

YOUR PHONE: \_\_\_\_\_ EMERGENCY PHONE: \_\_\_\_\_

SHELTER LOCATION INSIDE/OUTSIDE HOME (IF INSIDE WHERE IS IT LOCATED AT) (IF OUTSIDE HOW CLOSE TO HOUSE IS IT LOCATED)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CAPACITY OF SHELTER \_\_\_\_\_

TYPE OF SHELTER: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

ANY OTHER INFORMATION: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**TO BE FILLED OUT BY EMERGENCY MANAGEMENT OFFICIALS**

FIRE DISTRICT: \_\_\_\_\_

COORDINATES OF SHELTER: \_\_\_\_\_

ANY QUESTIONS CALL GREGG AT 417-223-7575