



City of Kemp Emergency Notifications Sign up

Please complete form and email to court@cityofkemp.org or bring to City Hall

User Name: _____
First Name: _____
Last Name: _____
Password: *We will create a generic password* Password1
Security? : What is the city where you were born? Answer: _____
Email Address: _____

How to contact me:

Primary SMS Text: _____
Primary Phone: _____
Primary E-mail: _____
Work Phone: _____
Secondary SMS Text _____
Secondary Phone: _____
Secondary Email: _____
Home Phone: _____

Address: _____
City: _____ State: _____ Zip Code: _____

Would you like to receive?

Community Alerts YES NO
Do you have any special needs? YES NO
If yes please list special needs: _____

Do you have any volunteer skills you would like listed on your account such as:

- C.E.R.T. Trained
- Counseling / Mental Health
- Disaster Service Worker
- EMT
- Fluent in another language
- Can operate heavy equipment
- Has heavy equipment
- Medical Professional