INSTRUCTIONS

Complete application in its entirety. Only one (1) application per household will be processed. For more information or to request assistance in completing this application, please contact Clarisell De Cardenas, Community Engagement & Outreach Director at (305) 512-7133. Return your completed application to Town of Miami Lakes, Community Engagement & Outreach Department, 6601 Main Street, Miami Lakes, FL 33014.

CRITERIA

The Jerry's Squad Hurricane Preparedness Assistance program is open to Town of Miami Lakes residents ONLY who are elderly, frail, live alone and will shelter in place during a storm. The deadline to register to be considered is on May 31, 2018 at 5:00 pm.

Property Owner Information		
Name:		Phone:
Property Address:* *Hurricane Shutter Installation Assistan	ace will only be provided to first floor of your hom	☐ Owned ☐ Rented
Marital Status: ☐ Married	☐ Single ☐ Divorced ☐ W	idow □ Separated
Household Size: under the age of 18, 18-64, over the age of 65 *To determine your household size include yourself, your spouse, and the number of people who live with you.		
During a storm, do you plan to stay at the address above? ☐ Yes ☐ No		
Hurricane Preparedness Assistance Request (Shutters must be in working condition.)		
Please check assistance type: Shutter Installation: □ Plywood* □ Panel □ Accordion *only pre-measured and pre-drilled plywood shutters will be considered		
☐ Heavy furniture and/or plants		
Waiver and Consent		
knowingly freely, and voluntarily assume all risk and liability for any damage or injury to person or property that may occur as a result of my participation in activities or use of any facilities or equipment of the Town of Miami Lakes, and do hereby release, discharge, and covenant not to sue the Town, its Town Council, Mayor, Town Councilmen, Manager, Appointed Officials, any Town Department or subdivision, its employees, attorneys, servants, representatives, officers, agents, successors and assigns from and against any and all claims, demands liens, liabilities, judgments, losses, and damages (whether or not a lawsuit is filed) including, but not limited to costs, expenses, and attorney's fees, at trial and on appeal brought for, by or on behalf of myself against the Town, its Town Council, Mayor, Town Councilmen, Manager, Appointed Officials, any Town Department or Subdivision, its employees, attorneys, servants representatives, officers, agents volunteers, and successors and assigns, arising out of or in connection with in whole or in part, directly or indirectly, my attendance and /or participation or use of any Facilities or Equipment of the Town of Miami Lakes. Additionally, I shall indemnify and hold the Town, its Town Council, Mayor, Town Councilmen, Manager, Appointed Officials, any Town Department or subdivision, its employees, attorneys, servants, representatives, officers, agents, counters and successors and assigns harmless from the use of any facility or equipment caused by negligence recklessness, intentional misconduct, or any act or omission by myself. Both you and your spouse (if applicable) must sign here for this application to be accepted.		
Signature of Applicant	Signature of Spouse/Partner (if applicable) Date
Submitting the application does not guarantee enrollment in the Hurricane Preparedness Assistance Program.		
Office Use Only		
y		
Date Submitted:	This application has been:	☐ Approved ☐ Denied
Reason for denial:		
	Committee	ee Member Signature