



FOR OFFICIAL USE ONLY

Marine Corps Air Station FAMILY READINESS PROGRAM CONTACT SHEET

PRINT LEGIBLY TO ENSURE THE ACCURATE TRANSFER OF DATA INTO THE COMMUNICATION TOOL. COMPLETE THE FORM IN ITS ENTIRETY, THEN SIGN AND DATE.

MARINE CORPS FAMILY READINESS PROGRAM MASS COMMUNICATION TOOL PRIVACY ACT STATEMENT

AUTHORITY: 10 USC 5013; EO 9397.10 USC 5041

PURPOSE(S): To obtain information needed for the Family Readiness Program Mass Communication Tool that will enable Marine Corps Commanders and their designated staff members to communicate in an accurate, rapid and efficient manner with Marine family members and others designated by the Marine en mass. The Tool has the options for sending notifications via email, phone or text messaging. No classified or casualty information will be distributed via this tool.

DISCLOSURE: Voluntary; however, if an enrollee fails to furnish information requested on this form it may impair the Commands' ability to communicate important information to those you designate, specifically while you are in a deployed status. Enrollees must provide the last four digits of the SSN in order to identify them and their selected contacts.

Rank	LName	FName	M.I.	Last 4 SSN		
Section		FAP/TAD/PERM	EMAIL ADDRESS			
SPOUSE	Full Name (Fir st M.I. Last)			Language Preference		
	Check all events or information this contact will be notified of.					
	<input type="checkbox"/> Pre-Deployment Events	<input type="checkbox"/> Deployment Updates	<input type="checkbox"/> Homecoming/Post-Deployment Events	<input type="checkbox"/> Family Readiness Events	<input type="checkbox"/> Family Readiness Newsletter	<input type="checkbox"/> Family Readiness Updates
	Home Phone (including Area Code) () -		Cell Phone (including Area Code) <input type="checkbox"/> Text-capable () -		Alternate Phone (including Area Code) <input type="checkbox"/> Text-capable () -	
	Email Address 1			Email Address 2		
Street		City	State	Zip		
BY PROVIDING THIS INFORMATION, I AUTHORIZE MY UNIT TO DISTRIBUTE OFFICIAL COMMAND COMMUNICATIONS TO THE FAMILY MEMBER(S) LISTED BELOW:						
1	Full Name (Fir st M.I. Last)			Relationship to Marine		Language Preference
	Check all events or information this contact will be notified of.					
	<input type="checkbox"/> Pre-Deployment Events	<input type="checkbox"/> Deployment Updates	<input type="checkbox"/> Homecoming/Post-Deployment Events	<input type="checkbox"/> Family Readiness Events	<input type="checkbox"/> Family Readiness Newsletter	<input type="checkbox"/> Family Readiness Updates
	Home Phone (including Area Code) () -		Cell Phone (including Area Code) <input type="checkbox"/> Text-capable () -		Alternate Phone (including Area Code) <input type="checkbox"/> Text-capable () -	
	Email Address 1			Email Address 2		
Street		City	State	Zip		
2	Full Name (Fir st M.I. Last)			Relationship to Marine		Language Preference
	Check all events or information this contact will be notified of.					
	<input type="checkbox"/> Pre-Deployment Events	<input type="checkbox"/> Deployment Updates	<input type="checkbox"/> Homecoming/Post-Deployment Events	<input type="checkbox"/> Family Readiness Events	<input type="checkbox"/> Family Readiness Newsletter	<input type="checkbox"/> Family Readiness Updates
	Home Phone (including Area Code) () -		Cell Phone (including Area Code) <input type="checkbox"/> Text-capable () -		Alternate Phone (including Area Code) <input type="checkbox"/> Text-capable () -	
	Email Address 1			Email Address 2		
Street		City	State	Zip		
3	Full Name (Fir st M.I. Last)			Relationship to Marine		Language Preference
	Check all events or information this contact will be notified of.					
	<input type="checkbox"/> Pre-Deployment Events	<input type="checkbox"/> Deployment Updates	<input type="checkbox"/> Homecoming/Post-Deployment Events	<input type="checkbox"/> Family Readiness Events	<input type="checkbox"/> Family Readiness Newsletter	<input type="checkbox"/> Family Readiness Updates
	Home Phone (including Area Code) () -		Cell Phone (including Area Code) <input type="checkbox"/> Text-capable () -		Alternate Phone (including Area Code) <input type="checkbox"/> Text-capable () -	
	Email Address 1			Email Address 2		
Street		City	State	Zip		
4	Full Name (Fir st M.I. Last)			Relationship to Marine		Language Preference
	Check all events or information this contact will be notified of.					
	<input type="checkbox"/> Pre-Deployment Events	<input type="checkbox"/> Deployment Updates	<input type="checkbox"/> Homecoming/Post-Deployment Events	<input type="checkbox"/> Family Readiness Events	<input type="checkbox"/> Family Readiness Newsletter	<input type="checkbox"/> Family Readiness Updates
	Home Phone (including Area Code) () -		Cell Phone (including Area Code) <input type="checkbox"/> Text-capable () -		Alternate Phone (including Area Code) <input type="checkbox"/> Text-capable () -	
	Email Address 1			Email Address 2		
Street		City	State	Zip		
Marine's Signature _____ Date _____						

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ALL DATA COLLECTED ON THIS FORM WILL BE STORED SECURELY AND PROTECTED FROM UNAUTHORIZED DISCLOSURE. IT WILL BE USED ONLY FOR OFFICIAL COMMAND COMMUNICATIONS

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