

# Sample LEPC or TEPC Membership Update Form

UPDATE FORM			
County:		Date:	
Area (if applicable):			
Presiding officer (county judge/parish president) (print name):			
Presiding officer approval (county judge/parish president) (signature):			
<b>LEPC or TEPC Membership Categories</b>			
Note: A single person may represent more than one category and more than one member may represent a category			
State/tribal/local official Law enforcement Firefighting	Emergency medical services Health/hospital Broadcast media/print media	Transportation personnel Local environmental group Community group	Facility owner/operator Other emergency management
<b>Advisory to All LEPC or TEPC Members</b>			
This information may be made available to the public under the State Open Records Act. <b>Do not</b> include home address, home telephone, or personal cell phone information.			
<b>CHAIRPERSON UPDATE</b>			
Name: Employer: Title: Address: City, state, ZIP:		Membership category: Phone: Cell phone: Email address:	
<b>VICE CHAIRPERSON UPDATE (If Appropriate)</b>			
Name: Employer: Title: Address: City, state, ZIP:		Membership category: Phone: Cell phone: Email address:	
Is this person a <b>new member</b> of your LEPC or TEPC? YES / NO		Did this person replace a previous member? If so, who?	
<b>GENERAL MEMBERSHIP UPDATES</b>			
Name: Employer: Title: Address: City, state, ZIP:		Membership category: Phone: Cell phone: Email address:	
Is this person a <b>new member</b> of your LEPC or TEPC? YES / NO		Did this person replace a previous member? If so, who?	

Name: Employer: Title: Address: City, state, ZIP:	Membership category: Phone: Cell phone: Email address:
Is this person a <b>new member</b> of your LEPC or TEPC? YES / NO	Did this person replace a previous member? If so, who?
Name: Employer: Title: Address: City, state, ZIP:	Membership category: Phone: Cell phone: Email address:
Is this person a <b>new member</b> of your LEPC or TEPC? YES / NO	Did this person replace a previous member? If so, who?