

Northeast Texas Regional Advisory Council – TSA F Member Information Sheet

Agency Information

Name of Agency:		County of Licensure:	
Physical Address:		County of Service:	
Mailing Address:			
City:	State:	Postal Code:	
Phone:	Fax:	Email:	

These two contacts will serve as your voting representatives with voting privileges at Hospital Preparedness Group and General Assembly

Primary Contact

Name:		
Phone:	Cell:	Email:

Secondary Contact

Name:		
Phone:	Cell:	Email:

EMS Services

Direct Dispatch Line: _____	Radio System: (MHz, UHF, VHF) _____	Primary Radio Frequency: _____
Number of Ambulances in Service: _____	911 Ambulances: _____	Level of Service: MICU ___ ALS ___ BLS ___
Number of Ambulances in Reserve: _____	Total Number of Staff: _____	Average # of Runs per Month: _____
Licence Number: _____		
Supervisors:		
Medical Director: _____	Email: _____	Phone: _____

Hospitals

# of Licensed Beds:	# of ED Beds:	# of Isolation Beds:	Estimated # of Surge Beds:

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All members are required to provide representation at 50% of at least one standing committee meetings and 75% of the Hospital Preparedness Group and General Assembly meetings. *Only the three contacts listed above will have voting privileges at General Assembly.*

General Assembly Committees (MUST CHOOSE AT LEAST ONE)

- Education/Injury Prevention/Pediatric Committee
Who: _____
- Hospital/Quality Improvement/Registry Committee
Who: _____
- EMS Committee
Who: _____
- Aeromedical Committee
Who: _____
- Stroke Committee
Who: _____
- Trauma System Plan Workgroup
Who: _____
- By-Laws Workgroup
Who: _____
- Trauma Symposium Workgroup
Who: _____

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Please list any suggestions, comments, or concerns

Name of Person Completing this Form: _____

Signature: _____

Date: _____

Membership dues are paid on a yearly basis. Dues are as follows:

Hospitals - \$400.00

Licensed EMS Providers - \$400.00

Please make checks payable to *NETRAC*.

Please return completed form to:

Shae Watson
NETRAC – TSA F
4086 Summerhill Square
Texarkana, TX 75503

Or

Fax: 903-255-0283

Or

Email: shae.watson@netrac.org