



Winchester Fire and Rescue Department  
**CAD TEXT MESSAGING REQUEST**

Name:		Date:		
Signature: <i>(only required for cell phone usage)</i>				
Contact Number:				
Contact Type: <i>(circle one)</i>	Cell	Home	Pager	Other
Desire to use cell phone text messaging <i>(Notifications)</i>	Yes or No <i>(circle one)</i>			
Desire to use cell phone text messaging <i>(Dispatch Information)</i>	Notification of major incidents (all the time) Yes or No <i>(circle one)</i>			
Cell Phone Carrier Name:				
Type of Incident Request <i>(circle one)</i>	1 Beep	2 Beep	3 Beep	
Email Address:				

**Return to the Fire and Rescue Office**