

VACATION PREMISE ALERT REQUEST FORM

We will be vacationing in your town or resort from _____ to _____

Please destroy this form after our departure date.

PLEASE MAKE YOUR OFFICERS AWARE THAT A SPECIAL NEEDS INDIVIDUAL IS VISITING YOUR AREA AND MAY REQUIRE ADDITIONAL ASSISTANCE.

Name and birth date of individual:

Nombre y fecha de nacimiento de la persona: _____ attach recent Photo here
foto reciente

Current physical description of individual:

Una descripción física actual de la persona: Male Female

Height _____ Weight _____

Altura _____ Peso _____

Eye color _____ Hair color _____

color de pelo _____ color de ojo _____

Scars or other identifying marks:

Cicatrices u otras marcas que identifican: _____

Any Medical conditions: Cualesquiera condiciones Blind/Persiana Deaf/sordo

Mental Retardation/Retraso Mental Mental Illness/Enfermedad mental Autism

Physical Disability/Inhabilidad física Diabetes Seizure/ataque Alzheimer's

Other/Otro: _____

Prescription medications needed:

medicación médicas de la prescripción: _____

Name of parents or care providers: _____

Nombre de padres o cuidado del niño: _____

Address/Dirección _____

Phone numbers/Número de teléfono:

Home/ Casa _____ Cell phone/ Teléfono celular _____

Pager/Beeper _____ TDD/TTY _____

Name of alternative emergency contact person:

Alternativa de la persona del contacto Nombre: _____

Phone numbers/Número de teléfono: Home/ Casa _____

Work/ Trabajo _____ Cell phone/ Teléfono de la célula _____

Pager/ Beeper _____ TTY/TDD _____

Is he/she likely to wander off?
¿El o ella le gusta vagar en diferentes sitios? _____

Favorite attractions or locations where they may be found:
Localizaciones preferidas en donde pueden ser encontrados: _____

Atypical behaviors or characteristics that may attract attention:
Comportamientos o características anormales que pueden atraer la atención: _____

Favorite toys, objects or discussion topics likes, dislikes:
Juguetes preferidos, objetos o asuntos de discusión que le gustan o no le gustan: _____

Approach, calming or de-escalation techniques most likely to work:
Técnicas del acercamiento para calmarlo: _____

Method of communication, if nonverbal, sign language, picture board, written words:
Método de comunicación, si no es verbal, lenguaje por signo, palabras escritas, letreros: _____

ID information. Do they carry or wear jewelry, tags, ID card:
Información de identificación. Usan joyas, etiquetas, tarjeta de identificación: _____

Your answers to these questions may assist police, fire, or medical personnel when they are responding to an emergency or other call from your home, in identifying and/or assisting you, or a person in your household who has a disability. There is no guarantee that this information will be accessed in the event of an emergency. This form is owned by SPEAK Unlimited Inc and is protected by copyright laws.

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