

Carers Emergency Alert Card Enrolment Form

Please write clearly in black ink

Card Number

Issue 1. 19.09.11

CONFIDENTIAL INFORMATION**Card holder's name:**

Address:

.....

.....

.....

Home No.:

Work No.:

Mobile:

E-mail:

Name of person being cared for (including any preferred name):

.....

Address:

.....

.....

Relationship to card holder:

Date of birth:

Home No.:

Mobile :

Details of people who have agreed to offer help in an emergency**First Contact**

Name:

Address:

.....

.....

Relationship (if any) to person being cared for:

Are they a Key holder? **Yes/No****Phone Numbers**

Home No.:

Work No.:

Mobile:

Second Contact

Name:

Address:

.....

.....

Relationship (if any) to person being cared for:

Are they a Key holder? **Yes/No****Phone Numbers**

Home No.:

Work No.:

Mobile:

Next of kin details of the person being cared for**NOK 1**

Name:

Address:

.....

.....

Relationship to person being cared for:

Phone Numbers

Home No.:

Work No.:

Mobile:

NOK 2

Name:

Address:

.....

.....

Relationship to person being cared for:

Phone Numbers

Home No.:

Work No.:

Mobile:

Please turn over

Doctor's name of the person being cared for: Address: Phone:	
Medical condition of the person being cared for (please give details):	
Do you ever leave the person you care for in the car? Yes/No If the answer is yes, please supply the following details: Make and Model of the car: Car Registration:.....	
Your special instructions in an emergency would be:	

If you would like information on other services by Chichester Careline please tick box ☐

I agree with the information contained in this form and for it to be shared in the event of an emergency. I undertake to notify Chichester Careline of any changes to the information I have provided.

Signed: **Date:**

On completion of this form please return it in the prepaid self-addressed envelope provided.

If any of the information on this form changes, please telephone Chichester Careline as soon as possible on **01243 778688**. Please quote your Carer's Emergency Alert card number on all correspondences.

PLEASE KEEP A NOTE OF THE INFORMATION PROVIDED FOR YOUR RECORDS.

OFFICE USE ONLY	
Has the information been inputted onto database?	<input type="checkbox"/>
Has a Key holder letter been sent to Emergency Contact?	<input type="checkbox"/>
Has information been sent if box ticked for other services?	<input type="checkbox"/>

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**CHICHESTER
Careline**

Provided by Chichester District Council

