



# Boyd County 911 Take Me Home Program Enrollment Form



## Subject Information:

First Name:

**Middle Name/Initial:**

**Last Name:**

**Preferred Name/Nickname:**

**Date of Birth:**

## Race:

## Sex:

**Height:**  cm **Weight:**  kg

**Hair Color:** **Eye Color:**

**Glasses:**      **Yes:**      **No:**

#### **Other Distinguishing Marks or Characteristics: (Tattoos,Birthmarks,Etc...)**

### Address:

City:

### State:

Zip:

## Disability:

## Alzheimer's

## Autism:

## **Deaf/Hard of Hearing:**

## **Mentally Disabled:**

**Other (Please Describe):**

**Recent Photograph of Subject:**

**Emergency Contact Information: (Add Up To Four)**

**Name:**

**Address:**

**Contact Number(s):**

**Relationship to Subject:**

**Name:**

**Address:**

**Contact Number(s):**

**Relationship to Subject:**

**Name:**

**Address:**

**Contact Number(s):**

**Relationship to Subject**

**Name:**

**Address:**

**Contact Number(s):**

**Relationship to Subject:**

**Background Information:**

**Are there special interests (outside of their residence) that your loved one is drawn to?  
(Examples: trains, water, woods, parks, malls, traffic, etc.)**

**Has your loved one ever run away or been reported as missing? If so, where were they found?**

**Is your loved one verbal or nonverbal? Please explain.**

**If applicable, are there any toys or specific objects that the subject responds to?  
Please list.**

**Does your loved one fear police or fire/EMS personnel or emergency vehicles?  
Please explain.**

**Does your loved one have any triggers?  
(Examples: lights, sirens, loud radio noise, etc.)**

**If your loved one becomes confrontational, how could police and fire/EMS personnel calm them without your presence?**

**Names of caregivers, parents, grandparents, or other family members involved in your loved one's life:**

**Electronic Signature Agreement\***

**By checking the "I agree" box below, you agree and acknowledge that,**

- 1) Your application will not be signed in the sense of a traditional paper document.**
- 2) By signing in this alternate manner, you authorize your electronic signature to be valid and binding upon you to the same force and effect as a handwritten signature.**
- 3) You may still be required to provide a traditional signature at a later date.**

**MY SIGNATURE BELOW CONSTITUTES AN AFFIRMATION THAT I AM RESPONSIBLE FOR THE PERSON NAMED ABOVE FOR WHOM I HAVE PROVIDED INFORMATION, AND THAT I CONSENT TO HAVE THIS INFORMATION SHARED AMONG LAW ENFORCEMENT PERSONNEL FOR ENROLLMENT IN THE TAKE ME HOME PROGRAM.**

**I agree.**

**Electronic Signature:**

**Name: First M. Last:**

**Date:**

**Email address:**