HARDEMAN COUNTY
Emergency
Communicatons
District (9-1-1)

SAFE REGISTRY FORM

SAFE = Special Assistance for Emergencies

PERSONAL INFORMATION

Location/Address:

Parent/Guardian Name:

Parent/Guardian Phone:

Person/Child Name:

Person's Information:

Gender : ☐ Male ☐ Female **Date of Birth:** **Height:** **Weight:**

Race: ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American

☐ Native Hawaiian or Pacific Islander ☐ White

Scars, Marks, Tattoos:

School:

Brief description of person (i.e. prior incidents and where they were found, etc)

This space is where you can share notes and other important information that you think responders need to know.

Note   **:**

PLEASE ATTACH A RECENT PHOTO:

CONFIDENTIALITY STATEMENT:

All information provided on this form remains confidential and is only released to first responders during emergent situations.