



WHITEHOUSE COMMUNITY SENIOR CONTACT ENROLLMENT FORM

DATE: _____

NO: _____

NAME: _____

HOME ADDRESS: _____

EMAIL: _____

PHONE NUMBER #1: _____

PHONE NUMBER #2: _____

DAY/TIME CONTACT CALL(S) TO BE MADE:

___ Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday

___ 8:00am ___ 9:00am ___ 10:00am

EMERGENCY CONTACTS (Must have access to the residence)

#1 NAME: _____

ADDRESS: _____

PHONE: _____

#2 NAME: _____

ADDRESS: _____

PHONE: _____

ADDITIONAL INFORMATION:

MILITARY VETERAN: YES NO **BRANCH OF SERVICE:** _____

INTERVIEW DATE: _____

NOTES:

ACCEPTED INTO PROGRAM **RESIDENCE KEY PROVIDED**

CANNOT BE ACCEPTED INTO PROGRAM (explain):

KNOX BOX REQUESTED

KNOX BOX INSTALLED

KNOX BOX NOT NEEDED **RESIDENTIAL KEY PROVIDED FOR EMERGENCY ENTRY**

Senior Program Participant: I understand the Whitehouse Senior Contact Program process and will actively participate in the program. I understand I will make the necessary phone calls to the Village on the days and times listed above. I further understand that should I fail to contact the Village at the days/times listed, my emergency contact(s) will be notified and/or a police officer will be sent to my residence and make entry into my residence in the least invasive way possible. I am also responsible for any damages to my residence incurred should a Whitehouse Police officer need to forcibly enter my residence to check on my welfare, and no other means of entry is available in a timely manner.

Name: _____

Date: _____

Signature: _____