

Emergency Contact Numbers

Date: _____

In the past we have experienced emergency situations, which have made us aware of the critical need for a current list of name and phone numbers of a contact person(s) or relatives(s) to notify in the case of an emergency.

It is especially important that if you are a seasonal resident that we have a local contact person(s) to reach in your absence, as well as your **permanent address and phone number**.

Please return this form to the office upon completion.

Name _____
(Unit Owner)

Unit No. _____ Phone _____

In Case of an Emergency Contact:

Name _____ Relationship _____

Phone No. _____

Address _____

Name _____ Relationship _____

Phone No. _____

Address _____

Resident Permanent Phone No. _____

Permanent
Address _____

E-mail address _____