

LAKE FOREST EMERGENCY QUESTIONNAIRE

Thank you for taking time to fill out this form. The purpose of this questionnaire is to gather information that will help the residents of our community plan and cope with an emergency situation that may occur in the future, including hurricane evacuations. This information will be maintained by the Lake Forest Homeowners Association and will not be available to anyone outside of our community.

Please complete one questionnaire for each resident.

1. **Your Name: First, MI, Last:** _____
2. **Your Street Address:** _____
3. **Telephone: Home** _____ **Cell** _____ **Work** _____
4. **Months that occupants may be absent from this Lake Forest residence**
From _____ **To** _____ **and From** _____ **To** _____
5. **Name and telephone number of key holder and/or person to be contacted in your absence**
Name _____ **Tel** _____ **Name** _____ **Tel** _____
6. **Other emergency contact: Name** _____ **Tel** _____ **Relationship** _____
7. **Names of other persons, besides yourself, living in your home:**
Name Two _____ **Name Three** _____ **Name Four** _____
8. **Does anyone at your residence have a disability?** Yes _____ No _____
If yes, indicate who and what the disability is _____
9. **Would anyone at your residence need assistance in an emergency?** Yes _____ No _____
If yes, describe who and what assistance will be necessary _____

10. **Does anyone at your residence have a special ability, which can aide our community in case of**
Emergency? Yes _____ No _____
11. **Would you be interested in participating in the Lake Forest Emergency awareness and**
Training program? Yes _____ No _____
12. **Would you be a Block Captain or a Block Captain substitute?** Yes _____ No _____

Thank you again for completing this form. All information will be kept confidential.