





# Neighborhood Firefighter Program

In times of power outages or natural disasters you may not be able to reach your loved ones who may be elderly or have special needs. The Neighborhood Firefighter is a program in which we will keep a log at our headquarters containing your relatives pertinent contact information. During such times, we will contact your loved one and ensure they are ok. If you are interested in this program, please contact out House #1 and ask for a member of our Administrative Staff.

We will need the following info:

- Your Name
- Your Address
- Your Phone Number
- Relatives Name
- Relatives Address
- Relatives Phone Number
- Reason for Signing Up for the program (i.e. medical problems, special needs, disability)

*Note: All information will be kept strictly confidential.*

## Emergency Information Form

This purpose of this form is for you to keep information for yourself or a loved one in a place where our firefighters can readily have access to it in times of emergencies. During emergencies, you or a family member may be upset and unable to recall vital information relating to the patient.

By following these simple steps, this information will always be at hand and allow the Emergency Staff to handle your emergency without delay:

- 1) Fill out this form to the best of your ability
- 2) ONE form per relative or occupant in your home
- 3) Place this form on the front of your refrigerator with a magnet
- 4) Update this form yearly or when information changes

Our firefighters will check your refrigerator in times when you or your loved one may be unconscious or unable to retrieve this informational card yourself.

If you have any questions, please feel free to contact us at:

Saline Valley House #1  
(636) 343-9300  
1771 Springdale Blvd.  
Fenton, MO 63026  
[www.salinevalleyfire.com](http://www.salinevalleyfire.com)

### Additional Meds / Allergies

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