

Office of the Sheriff

SHERIFF
ALAN NORMAN



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CLEVELAND COUNTY SHERIFF'S OFFICE

ARE YOU O.K.? EMERGENCY CONSENT FORM

I, {Name} _____, agree to participate in the Cleveland County Sheriff's ARE YOU O.K.? program. I do hereby give my permission to Emergency and/or Law Enforcement Personnel to respond appropriately to any perceived emergency situation involving my health and /or safety.

I have identified on my application the name of a key holder that I have given permission to release a key to Emergency and/or Law Enforcement personnel, and the names of family members for emergency contact, so that my house would be accessible for Emergency and/or Law Enforcement personnel in the event of an emergency.

In the event, that a key holder or other family member so named cannot respond, I hereby give permission in the event of an emergency situation involving my health and/or safety, to allow Emergency and/or Law Enforcement personnel to enter my residence by force if necessary, and without further delay, to insure my health and /or safety.

I, further understand that the information contained on the ARE YOU O.K.? Field Interview Form, will be released to Emergency and/or Law Enforcement personnel as necessary for me to participate in the ARE YOU O.K.? program.

Date

Subscriber/Participants Signature

Date

Witness

PLEASE SIGN AND RETURN THIS FORM WITH YOUR APPLICATION, WAIVER AND RELEASE FORMS