

North Muskham Parish Council – Emergency Assistance List

First name	
Surname	
Address	
Home telephone number	
Mobile telephone number (if you have one)	
Email (if you have one)	

If an emergency occurred in the village such as flood, fire, isolation would you potentially need help with any of the below (please tick): -

Assistance:	Tick
Regular contact and updates during an emergency	
Shopping & grocery collection	
Prescription & drug collection	
Getting to appointments with GP or hospital	
Moving furniture/upstairs or safe area	
Evacuating from residence	
Cleaning up afterwards	
Other	

Temporary Dates assistance required

From:

To:

I confirm that I am happy for North Muskham Parish Council to hold this record for use during an emergency only and not to be shared with any third party or emergency responding organisation, without my further express consent.

Signature	
Date	