



**Strathroy-Caradoc Police Service**  
299 Frances Street Strathroy, Ontario N7G 4G9

## Vulnerable Person Registry Form

<b>PART A: BASIC INFORMATION</b>		
Surname	G1	G2
Nickname(s)		
Date of Birth		Gender
Language(s) Spoken		
Home Address		
City		Postal Code
<b>PART B: PHYSICAL DESCRIPTION</b>		
Height (in ft)		Weight (in lbs)
Eye Colour		Hair Colour
Race		
Complexion		
<b>PART C: IDENTIFYING FEATURES</b>		
Hearing Aide(s) – Left or Right		Visual Aide(s) – Glasses, Contact Lenses
Other Identifying Features – Scars, Birthmarks, Tattoos, etc. (location and description)		
<b>PART D: HEALTH INFORMATION</b>		
Medical Conditions (Diagnosed or not)		
Allergies		Medications
Results of not taking medication		
Family Doctors Name		Family Doctors Phone
Other Doctors Name – Psychiatrist, Psycholgist, etc.		Other Doctors Phone
Places where the person may go (Example: Residence, previous address, store, library, park, etc.)		



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<b>PART E: EMERGENCY CONTACTS</b>			
Name 1	Relationship	Phone	Address
Name 2	Relationship	Phone	Address
<b>PART F: OTHER HELPFUL INFORMATION</b>			
Example: Favourite toy or blanket that child carries with them, potential of becoming violent, scared of police, etc.			
Photograph – Provide a recent photograph of the person			

Complete / Print and Submit this form to Colin Brabender [CBrabender@scps.on.ca](mailto:CBrabender@scps.on.ca)