

The Franklin Township Police Department has created a registry for individuals with autism spectrum disorder (ASD) or disabilities in efforts to give police quick access in an emergency to critical information about a person who is registered. The registry can provide police with emergency contact information, detailed physical descriptions, known routines, favorite attractions, and other helpful information for an individual with autism or other disabilities such as: Alzheimer's, dementia, Down syndrome, or any other endangered individuals.

This information can greatly assist police officers when time is essential in communicating and dealing with an emergency situation involving a person with autism as well as other disabilities.

The registration form asks for valuable information that police may need when helping individuals with autism or any other disability. We ask that all questions be filled out completely and a current photograph be provided. If you are unable to supply a photograph, we can take one for you. The information you provide is confidential and will only be used by law enforcement.

You are encouraged to contact us as soon as possible in the event any of the information provided on this form changes. Contact K9 Ofc. Joshua Fennimore at jfennimore@franklintownship.com or call (856) 694-1415 ext. 172 with any questions. Completed forms may be e-mailed, or taken directly to our police station.



FRANKLIN TOWNSHIP POLICE DEPARTMENT Autism/Developmental Disability Registration



General Information

| Name | DOB |
|---------------------------------------|--------------|
| Address | City, State |
| Zip Code | Phone (home) |
| Phone (mobile) | Email |
| Description | |
| Race | Sex |
| Height | Weight |
| Complexion | Eye Color |
| Hair Color | Hairstyle |
| Scars, distinguishing marks, or tatto | 008 |

Please attach a recent photo to this form. You can also schedule an appointment to have a photograph(s) taken at the Franklin Township Police Department. Please contact K9 Ofc. Joshua Fennimore at ifennimore@franklintownship.com or call (856) 694-1415 ext. 172.

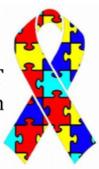


Other Information

| School/Employer | Phone Number | | | | | |
|---|---|--|--|--|--|--|
| Is this person verbal? If not, what is the best way to communicate? | | | | | | |
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| Does this person have any identification | on such as medical alert jewelry, IDs, or tracking? Does this | | | | | |
| person wander? Where might they go? | | | | | | |
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| What is the best way to approach this | person? How can we calm them? | | | | | |
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| Does this person have any life threaten | ning medical conditions? | | | | | |
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| | ould avoid when approaching or speaking with this person? | | | | | |
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FRANKLIN TOWNSHIP POLICE DEPARTMENT Autism/Developmental Disability Registration



Contact Information

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