



ShareCare of Leelanau, Inc.
231-386-2273



Please give Deb a call if you'd like her to put in a Lifeline referral for you. Munson Home Health will contact you to set up an appointment to install Lifeline in your home. Below, is the information Lifeline needs to get you set up. Please fill it out before the Lifeline representative comes to install your unit. Feel free to call the ShareCare office if you have any questions.

Name: _____ Date of Birth: _____

Language Preference: _____

Address: _____

County: _____

Phone Number: () _____ Cell Phone: () _____

Cross Street or Directions: _____

Hidden Key Location (recommended): _____

Do you have a phone jack? () Yes () No Do you have an electrical outlet near the phone? () Yes () No

Which do you prefer? () Necklace () Wrist strap () Bring both to show me

Drug Allergies: _____

Food Allergies: _____

Medical Conditions (heart, stroke, etc.): _____

Physical Limitations (use cane, visually impaired, etc.): _____

Primary Physician: _____ Phone: () _____ City: _____

Preferred Hospital: _____ Phone: () _____ City: _____

Responder Information: (family, neighbors, friends who could respond in an emergency—they must live within 15 minutes of your house):

Name/Relationship	Phone Number 1 (Include area code)	Phone Number 2 (Include area code)	Phone Number 3 (Include area code)	Do they have a key?

Lifeline will notify two people, after the fact. These are not people who will respond to your emergency calls, but people you feel should be notified that something has happened to you (kids, etc.)

Name/Relationship	Phone Number (Include area code)	Phone Number (Include area code)