



Oakland University Police Department

2200 North Squirrel Road · Rochester, Michigan 48309
248-370-3331 Dispatch · 248-370-3341 Fax · www.oupolice.com

EMERGENCY CONTACT FORM

NAME _____
Last First Middle

The information that you provide on this form will be used in the event of a serious injury or death that may occur while you are traveling. Please take the time to fill it out accurately because the data will be used to make appropriate notifications to your family.

Address _____

City _____

State _____ Zip Code _____

Home Telephone () _____ Spouse's Cell() _____

FAMILY INFORMATION

Spouse's Name _____

Address/Telephone _____
(if different)

Spouse's Employer _____

Work Address _____

Work Telephone () _____

E-mail address _____



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NOTIFICATION

Please list the persons you would like to be contacted by a police representative in case of serious injury or death. Begin with the first person you would like notified.

<u>NAME</u>	<u>ADDRESS</u>	<u>TELEPHONE</u>	<u>RELATIONSHIP</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are there any special requests or directions you would like followed upon your death?

Signature _____ Date _____

Spouse's Signature _____ Date _____

Witnesses _____ Date _____

Optional

_____ Date _____

Optional