

American Red Cross Reunification Registration Form

# **“Have you contacted your loved ones yet?”**

# The American Red Cross can assist you in telling your loved ones that you are safe and well. If you complete this form, your information will be entered into an American Red Cross Reunification Helper Tool where Reunification staff can search for information about you. Seekers will be notified by Red Cross staff if the individual they are looking for has registered in the system. The information that we can share with seekers is confined to the privacy option you select when registering. The American Red Cross may use this information to provide disaster relief services such as family reunification and may share it with other organizations involved in providing disaster relief.

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| **Red Cross Instructions for Using Form** | | | | | | | |
| Use this form when there is no internet connectivity available, and someone wishes to register as “Safe” with the American Red Cross. Forms should be taken to the nearest location for data entry into the event’s Reunification Helper Tool. Treat the form as confidential information and shred it following data entry. | | | | | | | |
| **CLIENT** | | | | | | | |
| FIRST NAME | |  | LAST NAME |  | | | |
| EMAIL ADDRESS (SUGGESTED) | |  | DATE OF BIRTH (REQUIRED) | | | | |
| **PRE-DISASTER HOME INFORMATION** | | | | | | | |
| PRIMARY PHONE | | WORK PHONE (SUGGESTED) | | | | OTHER PHONE (SUGGESTED) | |
|  | |  | | | |  | |
| HOME ADDRESS | | CITY | | | | STATE | ZIP |
|  | |  | | | |  |  |
| **BEST CURRENT CONTACT INFORMATION** | | | | | | | |
| ADDRESS | | CITY | | | | STATE | ZIP |
|  | |  | | | |  |  |
| **INFORMATION SHARING OPTIONS**  (To make your selection, check boxes next to the appropriate messages) | | | | | | | |
| **Yes** (share my details): Allow people looking for me to know that I have registered, my phone number and my destination address  **Registered only:** Allow people looking for me to know that I have registered. Do not share contact details.  **Do Not Release:** Do not allow people looking for me know that I have registered or ANY other information. (Note; your information may be used if required by police/welfare and emergency services ONLY relevant to the emergency) | | | | | | | |
| **Red Cross Use Only** | | | | | | | |
| DRO Number /Location | Print Name or Enter Vol Connection No. | | | | Print Name or Enter Vol Connection No. | | |