



Insert photograph here

**CAPITOLA POLICE DEPARTMENT**  
ELDERLY /DISABLED/SHUT-IN /WANDERER ALERT

Someone will be happy to assist you Monday - Friday between 8:00 a.m. and 5:00 p.m.

The information you provide will be placed in a log and accessible to our police officers, should your loved one wander, be in need of a home check, or be in need of help during a large scale emergency or disaster.

Circle all that apply:

Elderly    Disabled    Shut-in    Wanderer    Alzheimer's    Dementia    Diabetic

Other diagnosed illness (*please describe if applicable*)

Name and date of birth of person: \_\_\_\_\_

Their address: \_\_\_\_\_

Their Primary Care Physician's name/number: \_\_\_\_\_

Your Name: \_\_\_\_\_

Your relationship: \_\_\_\_\_

Your address: \_\_\_\_\_

Your phone numbers: \_\_\_\_\_

Any other information you wish to share: \_\_\_\_\_

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You may fax the completed form to 831-479-8881, however, please do not fax photographs.  
You may mail the information / photographs or deliver it in person to:

Capitola Police Department  
422 Capitola Avenue, Capitola, CA 95010