

EL PARQUE REGISTRATION & EMERGENCY FORM

(One for each person)

Casa# _____ Phone #376 _____ Email _____

Name _____

Children and ages living with you _____

Are you a Homeowner? _____ Renter? _____ Duration of lease? _____

Start and end date of lease _____ Cell number in Mexico _____

Phone number outside of Mexico _____

Pets and number Cats _____ Dogs _____ Other _____

Vehicle: Model _____ Year _____ Color _____ License # _____

Emergency Contacts and phone numbers _____

In case of your DEATH, who do we contact? _____

Who is responsible for your home during your absence? _____

Do they have a key to your house? _____ Cell _____

MEDICAL INFORMATION

Blood Type _____ Allergies _____

Primary Doctor _____ Phone _____

Other Doctor _____ Phone _____

Do you have a Mexican Will? _____ A Living Will? _____

Who has a copy of it? _____ Phone: _____

Name of your Notario: _____ Phone: _____

Are you registered at any local hospital? If yes, where?

In case of your death, do you have a local funeral home arrangement? If yes, where?

Health insurance? If yes, whom? _____

This information will help your loved ones to deal with this stressful situation.