

Penticton Indian Band EOC 841 Westhills Drive, Penticton BC V2A 0E8 Phone: (250) 493-0048

PIB Emergency Registration Form

PLEASE PRINT OR FILL IN			
IB MEMBER HOST INFORMATION		Date:	
Full Name:			
5 XXf Ygg.			
Phone Number:		Are the Evacuee(s):	From:
Email Address:		Evacuated Order	Penticton Indian Band Lower Similkameen
		On Alert	Okanagan Indian Band
Number of Adult Evacuees		Extraordinary	Osoyoos Indian Band Upper Similkameen
Number of Child Evacuees		circumstances. Such as, Medical or Mobility Issues)	Upper Nicola Indian Band Westbank First Nation
Did the evacuee(s) bring pets/livestock: If NO		YES	Other:
yes to pets or livestock, please describe			
Do any of the evacuee(s) require any special m If yes, Please fill in the following information and contact equipment, mobility and medication needs (250) 493-77 If yes, describe:	edical a et the PIE	attention? NO 3 Health Department to assist yo	YES u with any medical
ii yes, describe.			
If yes, Please let us know the following: Physician Name: FI	N Health	n Nurse Name:	
Care Giver Name:			
Has the evacuee(s) registered for Emergency	Support	t Services?	
In Person Online			
Would they like assistance to register?	Yes	No	
Did the evacuee(s) bring any of the following? Car Truck Trailer Te	nt	Other:	

^{**}All information collected in this form is confidential and intended for emergency use only by the Penticton Indian Band and PIB Health Department. Penticton Indian Band (PIB) and/or PIB Health Department will not, in any circumstances, share your personal information with other individuals or organizations without your permission, including to public organizations, corporations or individuals without your consent or permission.