GOOD MORNING CHECK IN

The Town of Gorham, New Hampshire is concerned with the welfare of its senior residents and others who may require assisted living. The Town of Gorham, Police Department has established a safety check program titled "GOOD MORNING GORHAM". This program is designed to ensure the safety and well being of our residents.

The GOOD MORNING Program work as follows;

1. The Registered Resident call the Police Department each Morning by 10:00 A.M. to check in.
2. If the Registered Resident does not call the Police Department by 10:00 A.M. the Police Department will Call the Registered Resident to confirm that everything Is Ok.
3. If there is no answer at the Registered Residents home, The dispatcher, will dispatch a Police Officer to the Registered residents home to check their well being.

Proper notification should be made to the Gorham police Department during periods of absence from the residence. It is the sole intent of the Gorham Police Department to provide a means of verifying you are safe and sound and not in need of assistance. This program has been in operation and has proven to be a success. This is a voluntary program for residents of the Town of Gorham. If you are interested in participating in the program, fill out the attached form and return it the Police Department either in person or by mail

To: Gorham Police Department
   Dispatch Supervisor
   20 Park Street
   Gorham, N.H. 03581
If you are interested in participating in “GOOD MORNING GORHAM” Please fill out the questionnaire and return to:

GORHAM POLICE DEPARTMENT
DISPATCH SUPERVISOR
20 PARK STREET
GORHAM, N.H. 03581

Name: ____________________________________________

Address: __________________________________________

Description of Home: ____________________________

Telephone #:_____________________________________

Date Of Birth: __________________________

Handicaps ________________________________________

Medications _______________________________________

Doctors Information, ____________________________

Name, address, phone #, relationship of person(s) to notify in case of emergency:

1. _______________________________________________

2. _______________________________________________

3. _______________________________________________

Additional Information:

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