

Senior Citizens and Vulnerable Person Registry – Tipperary Division

Affix
Photo
Here
|
(Optional)

Name: _____
Address: _____
Approximate Age: _____ Eircode: _____
Tel No: _____ Mobile No: _____



Where most likely to visit / wander:

Any distinguishing features:

Emergency Contact 1:

Name _____

Tel. Contact No. _____

Address: _____

Emergency Contact 2:

Name: _____

Tel. Contact No: _____

Address: _____

Proof of Identity (Specify type – Passport/Driving Licence/Other): _____

Signature (Signature of Senior Citizen/Vulnerable Person/

*Authorised Person on behalf of applicant i.e. *Member of applicant's family/legal guardian/ Power of Attorney/Applicant's Community Nurse/ Applicant's Doctor: _____

Name in Block Capitals: _____

Address of Signatory, (if not applicant): _____ Dated: _____

Applications, enquiries and all aspects of the process are strictly confidential, subject to Data Protection Legislation.
Personal data processed by An Garda Síochána is only shared with another body or organisation
where there is clear, legal basis to do so.
This information will only be used in the event of an emergency.

Dementia and Alzheimer's are debilitating illnesses that impact the sufferer and their loved ones.
An Garda Síochána are committed to supporting everyone impacted by these conditions.