

# ALS SOCIETY OF PRINCE EDWARD ISLAND

## Confidential Registration

P.O. Box 1643  
 Summerside, PE  
 C1N 2V5  
 902-439-1600



**Name** \_\_\_\_\_  
Last First Initial Title

**Address** \_\_\_\_\_  
Street (& mailing address if different)

\_\_\_\_\_ City Prov. Postal Code

**Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_  
yyyy/ mm /dd

**Telephone** \_\_\_\_\_  
Home Business

**Email:** \_\_\_\_\_

Occupation/Employer \_\_\_\_\_

Email \_\_\_\_\_

Diagnosed by: \_\_\_\_\_

Date: \_\_\_\_\_ Where : \_\_\_\_\_

Family Dr. \_\_\_\_\_ Tel: \_\_\_\_\_

Address \_\_\_\_\_

**Medical Insurance**  
 PHN (Provincial Health #): \_\_\_\_\_

Do you have coverage beyond Provincial Health Care?  
 No  Yes - If Yes check below:

Private  Dept. of Veterans Affairs

**1. Primary Contact** \_\_\_\_\_  
Last First Initial

**Relationship** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_  
Street (and/or Box # if needed)

\_\_\_\_\_ City Prov. Postal Code

**Telephone** \_\_\_\_\_  
Home Business

**Email:** \_\_\_\_\_

**2. Next of Kin/Contact** \_\_\_\_\_  
Last First Initial

**Mailing Address** \_\_\_\_\_  
Street (and/or Box # if needed)

\_\_\_\_\_ City Province Postal Code

**Telephone** \_\_\_\_\_  
Home Business

**Other Supports**  
 Community Activities: \_\_\_\_\_

Affiliations: \_\_\_\_\_

Faith Community: \_\_\_\_\_

Do you have a Personal Directive?  Yes  No

Do other family members have neuromuscular disorders?  
 Yes  No

\_\_\_\_\_  
 Client Signature

\_\_\_\_\_  
 Date

**If you choose to be available for contact by other ALS clients, please read the following carefully:**

I am interested in contact with other ALS clients, and hereby give permission to the ALS Society of PEI, to share with their ALS clients the following personal information:

Check applicable items:  my name  email address  phone number

I understand I would be contacted by the ALS office prior to release of such information.

\_\_\_\_\_  
 Client Signature

\_\_\_\_\_  
 Date

The ALS Society of PEI respects privacy and adheres to all legislative requirements with respect to protection of privacy. The ALS Society of PEI does not rent, sell or trade contact lists. Personal information is used only to deliver services, inform you of Society activities including programs, services, special events, funding needs, and volunteer and donor opportunities. If you wish to be removed from any ALS Society lists please contact the office listed above.