

## S.H.T.F. Refuge Intake Registration.

<b>First Name</b>			<b>Last Name</b>		
<b>Gender M/F</b>	<b>Age</b>	<b>DOB</b>	<b>Date of Arrival</b>		
<b>Home Address.</b>					
<b>List the family members you arrived with.</b>					
<b>Medical and Special Needs.</b> Do you have any allergies to food or medication? Y/ N (if YES, describe that allergy)  Do you have an illness and/or medical condition? Y/ N (if YES, describe that condition)					
<b>List of medications you are currently on.</b>					
<b>Profession/Trade.</b>					
<b>Location (address) of business or workplace.</b>					
<b>Other Skills and Hobbies that will be of use to a grid down community.</b>					
<b>Do you have any enemies? Y/N</b> (if YES, list the names of any and all enemies and why they may seek vengeance upon you)					