Gwen's Advance Care, LLC
"Where Family Matters"

Emergency Contact Authorization Form

Gwen's Advanced Care, LLC, requires members to complete an Emergency Contact Authorization Form. This authorization form is placed in the members' file. The member's legal guardian's signature is Authorization for Gwen's Advances Care, LLC, to contact the person(s) listed below in the event of an emergency. It is the member's legal guardian's responsibility to complete a new form and submit it to Gwen's Advanced Care, LLC when information is no longer valid.

Person(S) To Contact In Case Of An Emergency

Contact #1 Name	Contact #1 Phone Number
Contact #1 Address	Contact #1 Email

Contact #2 Name	Contact #2 Phone Number
Contact #2 Address	Contact #2 Email

Contact #3 Name	Contact #3 Phone Number
Contact #3 Address	Contact #3 Email

Member/Legal Guardian Name (Print)	Date
Member/ Legal Guardian Signature	Date
Gwen's Advance Care Representative Signature	Date