



Lincoln County EMA

★ Project Lifesaver ★

32 High St. Wiscasset, ME 04578

Phone # (207) 882-7559



Project Lifesaver Client/Caregiver Application

This application is designed for Custodial Care Givers to apply for participation in the Lincoln County Emergency Management Agency Project Lifesaver program. By completing and submitting this form, you will be considered for participation in Project Lifesaver.

~Client Information~

****Please Fully Complete This Form****

Client Name: _____

Address: _____

City/State: _____ ZIP: _____

Date of Birth: _____ Sex- Male: // Female: (check one)

Name of Spouse: _____ - Living: // Deceased: (check one)

What disorder does the Client have? _____

Ever been lost before? - Yes: // No: (check one) Where/When: _____

How was he/she found and by whom? _____

Was law enforcement contacted? - Yes: // No: (check one) Agency: _____

Caregiver Information

Name: _____ Email: _____

Address: _____

City/State: _____ ZIP: _____

Home Phone: _____ Work Phone: _____ Cell/Pager: _____

Relationship to Client: _____

Please Mail **Completed** Form to:

Lincoln County EMA

"Project Lifesaver"

P.O. Box 249

Wiscasset ME 04578

Or Email to: lincolncountyema@lincounty.me