

**Evacuation Details:**

Date of Evacuation:

Date of Registration:

Municipality/City/Town:

Registration #:

Registrant Details:**Registrant:** Last Name:

First Name:

Year of Birth:

Co-Registrant: Last Name:

First Name:

Year of Birth:

Dependent Children Name and Year of Birth:

A separate registration form is required for any children 18 years or older.

Please list the number and type of pets that you are evacuating with (e.g., 2 cats, 1 dog, etc.):

Phone Number(s):

Email Address(es):

Please list any special circumstances that need to be considered for you and your family to evacuate successfully.

Address and Accommodation Details:

Emergency Social Services supports are provided to those evacuating their primary residence. Is the address you are evacuating from your primary residence?

Yes

☐

No

☐

Please include apartment number (if applicable), street number, street name, city/town, and postal code.

Primary Home Address:

Primary Mailing Address (if different from above):

Temporary Mailing Address During Evacuation:

What city/town are you being evacuated to, if known?

What type of accommodations will you be staying in while evacuated?

Unknown ☐ Friends/Family ☐ Hotel ☐ Campground ☐ Short-Term Rental ☐

Other ☐ Please explain if 'Other':

Insurance Details:

Do you have house or tenant insurance? Yes ☐ No ☐ Unknown ☐

Does your house or tenant insurance cover damages for this type of event (e.g., fire damage, flood damage, etc.)? Yes ☐ No ☐ Unknown ☐

This information is collected under the authority of The Emergency Measures Act and is necessary for administrative purposes. It may be shared with other public bodies, organizations and/or agencies to enable the provision of emergency services. Disclosure of personal information is subject to the provision of the Freedom of Information and Protection of Privacy Act. If you have any questions, please contact Emergency Social Services by email at essevacuations@gov.mb.ca or by phone at 204-945-5324.

Signatures:

Date:

Local Authority Signature:

Registrant Signature:

Co-Registrant Signature:

Provincial ESS Signatures:

Clear/Reset Form