

Do you have a loved one who may need special assistance in an emergency?

Is there information that will enable law enforcement to better understand their disability?

The Take Me Home Program is a confidential and local information system administered by the Sterling Police Department. It is designed to help those with Autism, Alzheimer's, Dementia, or any developmental disability by providing critical and timely information to law enforcement and first responders.

When you enroll your loved one into the Take Me Home Program, you provide key information including a physical description and emergency contact that enables the Sterling Police Department to locate or assist the enrolled individual in an emergency situation.

ENROLL NOW!

Complete the attached registration form.

Call the Sterling Police Department at 978-422-7331 for an appointment to submit the registration and have a digital picture taken.

Additional Registration Forms available online at sterling-ma.gov or at the following locations:

**Sterling Police Department
135 Leominster Road
978 422-7331**

**Sterling Senior Center
36 Muddy Pond Road
978-422-3032**

**Sterling Fire Department
5 Main Street**

**Sterling Library
4 Meetinghouse Hill Road**

**Sterling Town Hall
1 Park Street**

TAKE ME HOME PROGRAM

***HELP US KEEP YOUR
LOVED ONES SAFE***





Business (978) 422-7331
Facsimile (978) 422-0222

Sterling Police Department
135 Leominster Road
Sterling, Massachusetts 01564

TAKE ME HOME REGISTRATION

PERSONAL INFORMATION:

Last Name: _____ First Name: _____ Middle Initial: _____

Nickname: _____ Home Phone #: _____ Cell #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Facility Name: _____ Facility Phone Number: _____

PHYSICAL DESCRIPTION:

Date of Birth: _____ Gender: _____ Race: _____

Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

Disability: Alzheimer's _____ Dementia _____ Down Syndrome _____ Autism _____ Other _____

Commonly Worn Items _____

SPECIAL CONSIDERATIONS:

Combative _____ Wanderer _____

Triggers _____ Calmers _____

Other _____

EMERGENCY CONTACTS:

Name _____ Relationship _____ Address _____ Primary Phone _____ E-Mail Address _____
