

Ben Avon Volunteer Fire Company

7219 Church Ave. Ben Avon, PA 15202

Office: 412-761-7566 Fax: 412-734-9296

Email: benavonfiredept@verizon.net

SPECIAL NEED RESIDENT PROGRAM

The Ben Avon Volunteer Fire Company is requesting any family member who may need special help during an emergency to register with the fire company.

When an emergency call comes in, the address will be typed into a secure software program on a laptop installed on the fire trucks. The firefighters are then advised if anyone at the address needs special assistance.

In order for this program to be effective, the Ben Avon Volunteer Fire Company requests you complete the following form and return it to: Ben Avon V.F.C. 7219 Church Ave. Ben Avon, PA 15202.

Name _____ Age _____

Address _____

Contact Number: #1 _____ #2 _____

Emergency Contact _____ Contact Number _____

Nature of Disability

Autism _____ Hearing _____ Mobility _____ Oxygen _____ Vision _____

Other (specific) _____

Date _____

NOTE: All information submitted will be held in strict confidence with emergency service units only. Please remember to update your information should any changes occur.