

# Application Form



VICTORIA LIFELINE

Safe and independent living.

**FAX:** (204) 261-7719 or toll-free 1-877-784-6865

**MAIL:** Unit 4-1875 Pembina Hwy, Winnipeg, MB R3T 2G7

**EMAIL:** [info@victorialifeline.ca](mailto:info@victorialifeline.ca)

## CLIENT INFORMATION

Name

Address

City/Town

Postal Code

Home Phone

Alternate Phone

Date of Birth  
(D/M/Y)

Male

Female

---

## RESPONDER INFORMATION

**Responders** are family members, friends or neighbours Lifeline would call to check on you when help is needed. Responders should have a key to your home or know where one is located (lock box for example).

**Persons to Notify (PTN)** are family members or friends Lifeline would notify when an incident takes place. For example, the Response Centre can notify a relative who lives out of province if you are transported to hospital. An individual can be both a Responder and a PTN. **Additional Responders or PTNs can be added at the time of install.**

Responder # 1  
(name)

Relationship

Home Phone

Cell

Work

Responder

Person to  
Notify

Have  
a key

Minutes  
away

---

Responder # 2  
(name)

Relationship

Home Phone

Cell

Work

Responder

Person to  
Notify

Have  
a key

Minutes  
away

---

Responder #3  
(name)

Relationship

Home Phone

Cell

Work

Responder

Person to  
Notify

Have  
a key

Minutes  
away

---

## Help Button Options

GoSafe

AutoAlert  
(fall detection)

Standard  
Help button

Wrist  
Pendant

---

## Medical Information

Do you have any of the following medical conditions?

Please Check :

Heart Disease

Stroke

Diabetes

COPD

Epilepsy

Life Threatening Allergy

High Blood Pressure

Kidney Disease

---

Where do you keep your medications? (example: Kitchen cupboard)

Description:

---

Are you on  
any of the  
following:

Insulin

Dialysis

Anticoagulants

Are you:

Hearing Impaired

Legally Blind

Using a walker or cane

Are there any special instructions regarding medical conditions that EMS should be aware of?

Description

**If you need assistance filling out this form, please call our client service team at 1-888-722-5222.**

**Household Information (Please check box if it applies to you)**

Does anyone  
smoke?

Do you  
have pets?

Do you have a  
landline phone?

Lock Box  
Code

Telephone  
Provider

Location of hidden  
key or lockbox

---

**How did you Hear About Us:**

Method

Friend referral

Healthcare professional

Family member

Website

Radio

Print/TV ad

Coupon

Presentation

Other

---

**Thank you for choosing Victoria Lifeline - Manitoba's #1 Medical Alert Service**