

## **New Maryland Emergency Alerts Assistance**

The Village of New Maryland and Faith Baptist Church maintain a confidential registry to help responders know how to find you in order to provide the special care you may need during a disaster.

### **Who should register?**

- Persons who are frail or housebound
- Persons with a mobility, vision or hearing impairment
- Persons with a serious medical condition that makes them medically fragile
- Persons with mental disabilities or impairments

### **What kind of assistance can I expect if I register?**

You can request evacuation assistance and for someone to phone or check in on you.

### **How often will I have to register?**

We will notify you twice each year when it is time to re-register.

### **How quickly will help arrive after a disaster?**

Help will arrive within a few hours or it may take days depending on the nature and extent of the emergency and how severely your neighbourhood is affected.

*Village of New Maryland  
584 New Maryland Highway  
New Maryland, NB  
E3C 1K1  
(506) 451-8508  
Email: [office@vonm.ca](mailto:office@vonm.ca)  
Website: [www.vonm.ca](http://www.vonm.ca)*



*Faith Baptist Church  
525 New Maryland Highway  
New Maryland, NB  
E3C 1K1  
(506) 459-8756  
Pastor Larry Matthews  
Website:  
[www.faithbaptistchurch.ca](http://www.faithbaptistchurch.ca)*

**Vulnerable  
seniors and  
people  
with  
disabilities**

need special care  
during disasters

**Register today  
for  
New Maryland  
Emergency Alerts  
Assistance**

*Village of  
New Maryland  
and  
Faith Baptist Church*



# NEW MARYLAND EMERGENCY ALERTS ASSISTANCE

Vulnerable seniors and persons with Disabilities

## How do I register or get more information?

Fill out the form below or call us at 451-8508 or 459-8756 to have someone contact you.



Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_ Email: \_\_\_\_\_

What is the primary condition that makes you vulnerable to a disaster?  
(*Insulin dependent, live alone, vision impairment, need oxygen, wheelchair user, etc.*)

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Emergency contact name and phone number: \_\_\_\_\_

What type of assistance would you like during an emergency? (*Check any that apply*)

- I may need transportation assistance if an evacuation is required.
- I would like someone to call me or check on me during/after a disaster.

***I authorize this information to be maintained confidentially by the Village of New Maryland and Faith Baptist Church\* for use only during an emergency that may affect me in my home. Authorized release will only occur during an emergency to effect delivery of aid to the registered party or to verify registration.***

Signature of party or responsible caregiver: \_\_\_\_\_ Date: \_\_\_\_\_

[Return completed form to: Village of New Maryland, 584 New Maryland Highway, New Maryland, NB, E3C 1K1](#)

\*Members of Faith Baptist Church are participating in this program strictly as community volunteers and not as a religious undertaking. Their goal is to assist specific Village residents who have been identified as requiring help during a disaster.