

# NRIS National Registration

Disaster Code

PLEASE PRINT CLEARLY IN BLOCK LETTERS USING BLACK OR BLUE PEN

<b>Place of Registration</b>		<b>Date</b> DD / MM / YYYY	/ /	<b>Time</b> 24HR	
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<b>*Family Name</b>	
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*Given Names	Date of Birth / Age	*Gender M/F	*Hosp Y/N	Deceased Y/N

**Home Address**

<b>*Street</b>				
<b>*Town / Suburb</b>		<b>*State</b>		<b>*Postcode</b>
<b>Country</b> (if overseas)				
<b>Phone</b>		<b>Mobile</b>		

**Destination Address**

<b>*Street</b>				
<b>*Town / Suburb</b>		<b>*State</b>		<b>*Postcode</b>
<b>Country</b> (if overseas)				
<b>Phone</b>		<b>Mobile</b>		

<b>*Permission to Release Information</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Signature</b> <small>OF PERSON BEING REGISTERED</small> .....
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<b>Notes:</b>

<b>Registration Recorded By</b>		<b>Registrar's Initials</b>	
<b>Distribution To State Inquiry Centre:</b>		<b>Computer Entered (Initials)</b>	<input type="text"/>
<input type="checkbox"/> Fax <input type="checkbox"/> Email <input type="checkbox"/> Recom <input type="checkbox"/> Other		<b>Date</b>	<input type="text"/> / <input type="text"/> / <input type="text"/> <b>Time</b> <input type="text"/>

**Privacy:** This information will be used by Police and Emergency services to manage the emergency, account for evacuated people and ensure next of kin can be notified in cases of serious injury. With you permission, information will also be made available to friends and relatives who inquire about your welfare and whereabouts.

**\* Mandatory Field**