

Roommate Emergency Cheat Sheet

Available Online: <http://www.salisbury.edu/commuters/forms>

Roommate #1

Name: _____

Phone: _____

Permanent Address: _____

Relevant Health Issues: _____

Medicines Taken: _____

Allergies: _____

Emergency Contact Information:

Name: _____

Address: _____

Phone: _____

Relationship _____

Roommate #2

Name: _____

Phone: _____

Permanent Address: _____

Relevant Health Issues: _____

Medicines Taken: _____

Allergies: _____

Emergency Contact Information:

Name: _____

Address: _____

Phone: _____

Relationship _____

Roommate #3

Name: _____

Phone: _____

Permanent Address: _____

Relevant Health Issues: _____

Medicines Taken: _____

Allergies: _____

Emergency Contact Information:

Name: _____

Address: _____

Phone: _____

Relationship _____

Roommate #4

Name: _____

Phone: _____

Permanent Address: _____

Relevant Health Issues: _____

Medicines Taken: _____

Allergies: _____

Emergency Contact Information:

Name: _____

Address: _____

Phone: _____

Relationship _____