Emergency Contact Agreement

The WCA Omaha, its employees, and contractors will keep confidential any information disclosed by you in the course of our relationship. This information will not be disclosed to other parties without a written release signed by you, with the exceptions of a disclosure of child abuse/endangerment/neglect, duty to warn if a staff member believes a client poses a threat to themselves or others, and court subpoenas.

A safe emergency contact can be crucial in situations where there is substantial reason to believe that you may be in harm or there is a medical emergency. If at any point you wish to change this information, please notify a WCA staff member to update this form.

Emergency contact information:

Name: ________________________________________________________________

Relationship: ___________________________ Phone number: ___________________

Is it safe to leave a message with your emergency contact? Yes No

Preferred local hospital: ________________________________________________

Are there any guidelines or restrictions on how or when you would prefer the emergency contact is notified? For example, if we haven’t been able to make contact with you for a certain amount of days, is it safe to notify this contact?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Printed Name: ___________________________ Date: _________________________

Signature: ______________________________