



**OAKLYN POLICE DEPARTMENT
Autism/Development Disability &
Alzheimer's Registration**



In an effort to provide superior emergency and non-emergency police service to the residents of the Borough of Oaklyn, the Oaklyn Police Department has created a registration form for individuals with Autism and/or other disabilities. This will provide OPD quick access to important information in an emergency or when critical information is needed such as emergency contact information, detailed physical description(s), known routines, favorite attractions, effective communication techniques, or any specific needs of an individual with Autism or other disabilities such as Alzheimer's, Dementia, Down Syndrome or any other disability.

Additionally, the Oaklyn Police Department has established a ***"Blue Envelope Program"*** to enhance the communication between a police officer and a driver with autism spectrum disorder. *Blue Envelopes* are available at the Oaklyn Police Department and can be used as a designated place for the driver to secure their registration, proof of insurance, and driver license to easily hand to a police officer during a motor vehicle stop. The *Blue Envelope* also contains helpful tips and instructions for both the driver and the police officer on how to effectively communicate with each other.

We ask that all information and questions on the registration be thoroughly completed and to provide a current photograph. If you are unable to provide a photograph, an officer will be available to assist you upon request. The information you provide is **CONFIDENTIAL** and will only be used by law enforcement for law enforcement purposes.

Please contact the following with any questions or updates regarding this registration:

- Detective Tyler Rodgers 856-854-0049 x6028 or trodgers@oaklynpolice.com
- Clerk Kate Bataloni 856-854-0049 x6022 or kbataloni@oaklynpolice.com



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General Information:

Name: _____ Date of Birth: _____

Address: _____ City: _____

State: _____ Zip code: _____

Phone (Home): _____ Phone (Mobile) &
Carrier: _____

Email Address: _____

Employer: _____ School: _____
Address & Phone: _____ Address & Phone: _____

Physical Description:

Race: _____ Sex: _____

Height: _____ Weight: _____

Complexion: _____ Eye Color: _____

Hair Color: _____ Hair Style: _____

Scars, marks, or tattoos: _____

Please attach a recent photo (*here*).



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Additional Information:

Does this person communicate verbally? Yes or No If not, what is the best way to communicate?

List any disability identifiers such as medical alert jewelry, ID's, or electronic tracking equipment?

Does this person wander? If so, what areas do they frequent or where would they possibly go?

What is the best way to approach this person? List any methods OPD can use to help calm them.

Does this person have any life-threatening medical conditions?

Are there any triggers or actions we should avoid during our encounter with this person?



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Emergency Contact 1

Name _____

Address _____

Home Phone _____

Mobile Phone _____

Relationship _____

Email _____

Emergency Contact 2

Name _____

Address _____

Home Phone _____

Mobile Phone _____

Relationship _____

Email _____

Emergency Contact 3

Name _____

Address _____

Home Phone _____

Mobile Phone _____

Relationship _____

Email _____

