



I AM DISABLED

ENGLISH IS NOT MY PRIMARY LANGUAGE

VERBAL DIRECTIONS MAYBE HARD TO UNDERSTAND

MOVE SLOWLY - USE SIMPLE LANGUAGE

I CANNOT MOVE QUICKLY OR ON COMMAND

MOBILITY DEVICE MAY NOT BE PRESENT

I MAY NOT BE ABLE TO RESPOND

DO NOT TOUCH ME - I MAY BE IN DISTRESS



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EMERGENCY CONTACTS

Name Phone Number

Name Phone Number

LAWYER

Name/Firm Phone Number

MEDICAL CONDITIONS / ALLERGY

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