



**DEPARTMENT OF POLICE
195 FRENCH STREET
WATERTOWN, CT 06795
860-945-5200 F:860-945-2642**



WATER-OAK KEEP - IN - TOUCH (K.I.T.) PROGRAM

Dear Resident:

The Watertown Police Department is pleased to offer the Water-Oak Keep in Touch (K.I.T.) program which is a telephone-contact program designed to assure the safety and wellbeing of our residents living alone who do not have contact with other individuals or agencies on a daily basis.

For example:

- Homebound residents living alone with no one accessible to check on them regularly
- Residents living alone who are recovering from surgery of a brief illness
- Residents living alone who have a chronic illness or long-term disability

How the K.I.T. program works:

- Residents registered in the program will receive a call from the Town of Watertown employee between 9:00 a.m. and 10:00 a.m. every day
- If you do not answer your phone call by 10:00 a.m. a designated town employee first will call the contact person listed on your registration to inquire about your welfare and ask him/her to go to your home to check on you, if possible
 - If your contact is unavailable or unaware of your welfare, a police officer will be dispatched to your home to check on your wellbeing
- If you plan to be away from your home during that hour on ANY day, you must notify the Watertown Police Department (860-945-5200) and Senior Center (860-945-5250) ahead of time
- If you are going to be away from home for extended periods (vacations, hospital stays, etc.) you must notify the Watertown Police Department and the Senior Center of the days you will be away from your home
- You have the option of hiding a key on your property and letting the Watertown Police Department know where on your property a key is hidden. You can also leave a key with the Watertown Police Department. You can also provide the contact information for a person who has an extra key to your home

If you would like to register for the Watertown Police Department's K.I.T. program, fill out the registration form (separate document) and return it to the Watertown Police Department in person or by mail.

WATER-OAK KEEP – IN – TOUCH (K.I.T.) PROGRAM

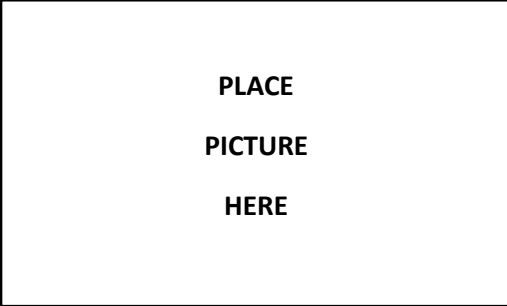
Registration Form

Please return this form by person of mail to:

K.I.T. Program Manager

Watertown Police Department, 195 French Street, Watertown, CT 06795

860-945-5200



PLEASE PRINT OR TYPE

Name (First, Middle Initial, Last): _____

Address: _____

Description of Home: _____

Phone (Home): _____ (Cell): _____

Date of Birth (Month/Day/Year): _____

Are you Physically Mobile? Yes No

Medical Conditions (Examples: Diabetes, High Blood Pressure, Heart Condition, Hearing or Visual Impairment, Chronic Illness, Memory Loss, Recent Surgery, etc.): _____

Medications and Frequency of Dosage (use back of form if needed): _____

Physician Name: _____ Phone: _____

Emergency Contact Person: _____

Relationship: _____

Phone (Home): _____ (Cell): _____

Address: _____

Email: _____

Case Worker, Caregiver or Agency Providing Care: _____

Phone: _____

Email: _____

Location of Key Hidden on Property: (This information is optional): _____

Who has an extra key to your home? (Name): _____ (Phone): _____

Do you have a pet that might restrict access to your home? (Yes) (No) (Type of Pet): _____

Vehicles Make & Model: _____ License Plate Number(s): _____

I agree to hold harmless, indemnify and release the Town of Watertown and its employees and agents for any claims that might result from its reasonable actions under this program.

Form Submitted By (Please Print):

Signature of Person Submitting Form:

For Official Town of Watertown Use Only

Initials:

Date Received: