



BARNSTABLE COUNTY SHERIFF'S OFFICE

Rapid Alert Notification System

TELEPHONE NUMBER AUTHORIZATION FORM

Date:_____

Name:_____

Residential Street Address:_____

Town:_____

Postal Zip Code:_____

Phone Number to be Added:_____

I agree to provide my published or unpublished home telephone number or cell number for the purpose of being notified by the Barnstable County Sheriff's Office Rapid Alert System. I will be responsible for updating the Barnstable County Sheriff's Office of any changes with this number or address. Please note that all phone numbers are kept strictly confidential and will be used for the purpose of Rapid Alert System notifications only.

Signature

Printed Name

Form can be returned to: Barnstable County Sheriff's Office
6000 Sheriff's Place
Bourne, MA 02532
Attn: Rapid Alert System Administrator