

THE PALMS RETIREMENT CENTER
525 East Davis Street
Harlingen, Texas 78550

NEAREST OF KIN FORM

Resident's Name _____ Apt # _____
Telephone _____

****IN CASE OF EMERGENCY CONTACT THE FOLLOWING****

Name _____ Relationship _____

Telephone (Home) _____ (Work) _____
Address _____
Street _____

City _____ State _____ Zip _____

Name _____ Relationship _____

Telephone (Home) _____ (Work) _____
Address _____
Street _____

City _____ State _____ Zip _____

Name _____ Relationship _____

Telephone (Home) _____ (Work) _____
Address _____
Street _____

City _____ State _____ Zip _____

PHYSICIAN _____ Telephone _____

PHYSICIAN _____ Telephone _____

PHYSICIAN _____ Telephone _____

Other appropriate information: _____

Signature _____ Date _____



The owner does not discriminate against persons with disabilities.

