The goal of the Special Needs Registry is to ensure all South Brunswick residents who may be in need of special assistance are able to get the help and support they need in a time of emergency or during interaction with Law Enforcement, Fire or EMS personnel.



The South Brunswick
Special Needs Registry
is proudly sponsored by the
South Brunswick
Police Department.





Each registrant will be provided with 2 window decals that can be placed on the front entrance of the registrant's residence as well as on the window of any vehicle in which they regularly travel. The presence of the SNR decal signifies to first responders that someone in the residence/vehicle has some degree of special need and that they should respond accordingly. The use of the decal is voluntary.

For further info call: 732.329.4000 x7460 or x 7469 or email: specialneedsreg@sbtnj.net

South Brunswick Police Dept. 540 Ridge Road Monmouth Junction, NJ 08852

SPECIAL NEEDS REGISTRY



Protecting & Serving All

Raymond J. Hayducka, Chief of Police

www.SBTNJ.net

Is there a cost to register?

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No, there is no cost to register.

Who is eligible to register?

The registry is open to any person who lives, works, or goes to school in South Brunswick and has a physical or mental impairment that subsequently limits one or more major life activities due to a physical and/or intellectual disability.

All information provided on the registry will remain strictly confidential and will only be utilized by first responders during times of emergency.



The South Brunswick Special Needs Registry is a voluntary service open to all citizens with special needs who reside, attend school or are employed in South Brunswick. The registry was created to help police officers and other emergency service personnel better assist residents with special needs in the event of an emergency by providing those first responders with vital information regarding a registrant's special needs, emergency contact information, physical description and current photograph.

How does someone register?

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The registrant's information can be easily inputted to the registry by completing an online application via our secure website:

www.SBTNJ.net

and emailing it to:
specialneedsreg@sbtnj.net
or mailing it to:
South Brunswick Police Dept.
540 Ridge Road
Monmouth Junction, NJ 08852

What information is necessary to register someone?

The information requested to register someone on the Special Needs Registry includes the registrant's personal identifiers such as their name, address, date of birth, height, weight, their emergency contact information, some details about their special needs and a recent photo. The registrant can also elect to provide some additional information about themselves such as their prescribed medications, medical conditions, places frequented, method of communication, calming methods, triggering conditions and contact information for their treating physicians.

SOUTH BRUNSWICK TOWNSHIP POLICE DEPARTMENT

Special Needs Registry Form

Raymond J. Hayducka, Chief James J. Stoddard, Deputy Chief

First Name	Middle Initial	
Last Name	Nickname (If Any)	
Home Address		
Home Phone	Cell Phone	
Date of Birth Gender Height	Weight Hair Color	
Eye Color Corrective Lenses	Scars/Piercings/Tattoos	
What is the registrant's special need? (i.e. Autism, Alzheimer's, Mental Illness etc.)		
Method of Communication: (Verbal, Non-Verbal, Sign Language, Written, Speech Assistance Device)		
What language(s) does the registrant speak or understand?		
Does the registrant utilize any tracking/health equipment? (Project Lifesaver, Life Alert, Mobile App)		
Life Threatening Medical Concerns? (Medicine, Allergies, Seizures etc.)		
A many that the manietomat for sweath (alexandra) and	sala atama fii and'a masidanaa ata \	
Areas that the registrant frequents (playgrounds, pools, stores, friend's residence etc.)		
Does the registrant gravitate towards water? If so can the registrant swim?		

Any triggers which affect	the registrant (i.e. loud nois	ses, bright lights etc.)
Any calming methods used	d for the registrant	
Does the registrant have a	driver's license? (If so list	license number)
Does the registrant own or	frequently drive a vehicle?	? (If so list make, model color and license plate)
Does the registrant attend	school or are they employe	d
Name of School/Employer	r	
School/Employer address		
School/Employer phone no	umber	
Emergency Contact Inform	nation	
First Name	Last Name	Relationship
Home Address		
		Cell Phone
authorized to submit it on my further understand that by en- that the personal information	behalf or as the legal guardia rolling myself or someone else entered may be used by emer ency medical services (first aic	being provided is truthful, current, and valid and that I am an with authority to submit it on behalf of another. I e in the South Brunswick Police Special Needs Registry gency personal, including, but not limited to, law d/paramedics), and fire department personnel in the event
Registry is voluntary and can	not guarantee and is not inten	rticipation in the South Brunswick Police Special Needs ded to convey and warrant, either express or implied, as n and participation in this program.
By signing below, I also ackr	nowledge that I understand the	e disclaimer.
(Signature of the Person Filling out this Form)		(Relationship to Registrant)
(Print Name)		(Date)

Please complete the application, scan and email along with a photograph to Specialneedsreg@sbtnj.net
Be sure to include SNR or Special Needs Registry in the Subject field when emailing.
Applications can also be mailed to or dropped off at South Brunswick Police Headquarters
Attn: Special Needs Registry, 540 Ridge Road, Monmouth Junction, NJ 08852