



Personal Emergency Profile Form

IMPORTANT: Your Personal Emergency Profile (PEP) contains important information that can help you in an emergency. **Only complete this form if you will be using our Urgent Response Service.**

- To ensure we receive your information quickly, we encourage you to use the online form available on your account page at lively.com/myaccount.
- If you do not have access to a computer, complete this form and mail it to:
Lively | ATTN: Urgent Response Account Support | P.O. Box 4428 | Carlsbad, CA 92018

General Information About the User

FIRST NAME	LAST NAME	TODAY'S DATE (MM/DD/YYYY)
<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
HOME PHONE NUMBER	EMAIL ADDRESS	
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> @ <input type="text"/>	
GENDER	DATE OF BIRTH (MM/DD/YYYY)	PRIMARY LANGUAGE (e.g. ENGLISH)
<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>
THIS PEP FORM IS FOR THE FOLLOWING DEVICE (select one only)		
<input type="checkbox"/> LIVELY PHONE	<input type="checkbox"/> ALL-IN-ONE MEDICAL ALERT	
Phone number of the Phone	OR	Serial number found on the back of the medical alert
<input type="text"/> - <input type="text"/> - <input type="text"/>		<input type="text"/>

Emergency Contacts

I CHOOSE NOT TO PROVIDE EMERGENCY CONTACTS

The contacts you provide will be authorized to call Urgent Response on your behalf in an emergency, including requesting the device's current location.

CONTACT 1 (This contact may be called in the event of an emergency. A phone number is required.)

FIRST NAME	LAST NAME	RELATIONSHIP TO USER (e.g. Brother)
<input type="text"/>	<input type="text"/>	<input type="text"/>
STREET ADDRESS	CITY	STATE ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
PHONE NUMBER 1	DOES THIS PERSON LIVE WITH THE USER?	IS THIS PERSON AUTHORIZED TO MAKE CHANGES TO THE USER'S PROFILE?
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
PHONE NUMBER 2		
<input type="text"/> - <input type="text"/> - <input type="text"/>		

CONTACT 2

FIRST NAME	LAST NAME	RELATIONSHIP TO USER (e.g. Brother)
<input type="text"/>	<input type="text"/>	<input type="text"/>
STREET ADDRESS	CITY	STATE ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
PHONE NUMBER 1	DOES THIS PERSON LIVE WITH THE USER?	IS THIS PERSON AUTHORIZED TO MAKE CHANGES TO THE USER'S PROFILE?
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
PHONE NUMBER 2		
<input type="text"/> - <input type="text"/> - <input type="text"/>		

Please go to lively.com/myaccount to confirm, update and add additional information including medications, medical conditions, physical conditions, doctors, hospitals, vehicles and frequented locations.

Urgent Response Service and the Personal Profile are limited to one user per subscription and cannot be shared with another person. The profile information you provide is personal to you and could be critical in assisting you in an emergency. We keep your profile confidential using a secure data center, and we only share your information with emergency personnel in the event of a critical situation. Lively is a registered trademark of Best Buy and its affiliated companies. ©2021 Best Buy. All rights reserved.