

Particulars of CF Member

Service Number	Rank	Last Name		Given Name & Initial
Home Unit Name		Home Unit Location	Trade	Status
				Reg F <input type="checkbox"/> Res <input type="checkbox"/> Civ <input type="checkbox"/>

Contact Information

Home Address		City/Province		Postal Code
Mailing Address (If different from above)		City/Province		Postal Code
E-mail Address	Home Phone	Cell Phone	Work Phone	
Marital Status	Married/Common Law <input type="checkbox"/>		Single <input type="checkbox"/>	Divorced/Separated <input type="checkbox"/>

Particulars of Children

	Given Name	Last Name	DOB	Living with you	Special Considerations
1				Y / N	
2				Y / N	
3				Y / N	
4				Y / N	

Additional children may be entered on separate form.

Posting Information

Posting In from (location)	Posting Date (D/M/Y)		Imposed Restriction?	Yes <input type="checkbox"/> No <input type="checkbox"/>
	In	Out	Are you new to BC?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Training / Deployment (Away From Home Unit) Information

Deployed Unit / Mounting Unit	Anticipated Deployment Date	Deployment Mission/ Location/ School		
Departure/Training Date	Anticipated Deployment/Training Return Date		Previous deployed?	

Release Information

Date of Release	MFRC will remove your information from all files upon your release			
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CONSENT

The information in this form will be kept confidential and used only for the purpose for which it is collected within the Military Family Resource Centres (MFRC), the Deployment Support Centres (DSC/DSG) and Unit. The MFRC and DSC adhere to the *Privacy Act*. I understand this information will be shared with DSG/DSC (deployments), MFRC and Units. In the Mainland BC Military Family Resource Centre, we strive to create an environment where you feel safe and supported. To protect your confidentiality and privacy, MFRC Staff will follow and adhere to the MFRC Privacy & Confidentiality Policy. Any personal information submitted will be used to assist the MFRC in creating, delivering and advising you of upcoming Programs and Services that you and your family may wish to partake in. The MFRC staff will not disclose your information to anyone without your consent unless circumstances such as legal, medical or security reasons make it impossible or impractical to seek consent. For more info call: 604-225-2520 ext 2550 or E-mail: office@bcmfrc.com; or visit www.bcmfrc.com .

- I have read and understood the above statements; and
 I hereby grant Mainland BC MFRC permission to contact my family members in accordance with the MFRC Privacy and Confidentiality Policy, or
 I hereby do not grant Mainland BC MFRC permission to contact my family members.

Member's Signature _____ Date _____

Service Number	Rank	Last Name	Given Name & Initial.

Family Contact Information

Primary Contact (1)	Secondary Contact (2)	Third Contact (3)
Name	Name	Name
Relationship to CF member	Relationship to CF member	Relationship to CF member
Language	Language	Language
Street	Street	Street
City	City	City
Province	Province	Province
Postal Code	Postal Code	Postal Code
Home Phone Number	Home Phone Number	Home Phone Number
Cell Number	Cell Number	Cell Number
Work Number	Work Number	Work Number
Email address	Email address	Email address
Prefer contact by Telephone <input type="checkbox"/> Email <input type="checkbox"/>	Prefer contact by Telephone <input type="checkbox"/> Email <input type="checkbox"/>	Prefer contact by Telephone <input type="checkbox"/> Email <input type="checkbox"/>

Special considerations that you or your family may have during posting to Mainland BC or time away on training or deployment (e.g. Pregnancy, Disability, Health or any other special needs.)

Date Rcvd & Initial Staff		Date Entered & Initial Staff		Date Filed & Initial Staff	
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