Peace of Mind Profile

For use by church staff and trusted family members to ensure care and connection in times of need.

Personal Information

Full Name: _____

Date of Birth: _____

Address: _____

Phone Number: _____

Church Name: _____

Contact Church (Yes/No): _____

Church Phone Number: _____

Emergency Contacts

Contact 1 Name: _____

Relationship: _____

Phone: _____

Email: _____

Contact 2 Name: _____

Relationship: _____

Phone: _____

Email: _____

Medical Information

Primary Doctor Name & Contact: _____

_____

Other Specialists (Name & Contact): _____

_____

Current Diagnoses: _____

_____

Preferred Hospital: _____

Allergies: _____

Pacemaker or Defibrillator (Yes/No): _____

Do you have a Do Not Resuscitate order (Yes/No):_____

Medications

Medications (Name, Dosage, Frequency, Purpose):

_____

_____

_____

_____

_____

_____

_____

_____

Pet Care Information

Pet Care Instructions: _____

_____

_____

_____

_____

_____

_____

Pet Care Contact Name: _____

_____

Pet Care Contact Phone: _____

_____

Home Information:

Spare key, plants to water, alarm system, etc.

_____

_____

_____

_____

_____

Phone Access:

Pin/Password: _____

Charger location:_____

Over ➡

Important documents to have in this bag/file

- Copy of Driver's License
- Medicare Card
- Supplemental Insurance Cards
- Prescription Card
- Advance Directives (e.g., Living Will, POA)
- POA Contact Information
- I-Post (Iowa) or POLST (Illinois) *Contact your physician to obtain this document.*

Go Bag Recommendations

It is recommended to have a go bag prepared with the following items:

- Change of clothes
- Underwear
- Socks
- Pajamas
- Toothbrush
- Razor
- Comb
- Hearing aid batteries
- Denture cleaner
- Extra glasses
- Chargers
- Book
- Bible
- Photos of loved ones
- Anything else important to you

Take a moment to ensure your Power of Attorney is in place and that someone you trust knows how to access your financial details, passwords, and other important documents.