As a community we are all concerned with the effects and tragedy that underage drinking brings. In our continuing effort to address house parties where underage drinking may occur, we are asking for your assistance.

When a parent and or guardian goes out of town, overnight or longer, and leaves a young person at home without adult supervision, we suggest that you notify the Police Department and/or a neighbor or friend that you trust.

When you notify the Police Department we will make our patrols aware that the parent [s] and or guardian [s] will be away and to make periodic checks of your home for any suspicious activity. In the event an officer observes any questionable activity, we will contact you or the contact person you have listed with us. This notification process does not give the officers permission to enter your home without your consent unless an emergency exists. This program is very similar to when we are asked to keep watch on a vacant house for various reasons.

Please fill out the attached form when you have plans to leave a young person at home under the above stated conditions.

Thank you in advance for your assistance.

Seekonk Police Department
Please complete this form and return it to the Seekonk Police Department.

Date Leaving: ________________________ Return date: ________________________

Name [s]: ___________________________________________________________

Address: __________________________________________________________________

Home phone: ________________ Contact/Cell phone:1 ________________________

Contact/Cell phone:2 __________________________________________________________________

Name of person [s] at home: 1. ___________________________ Date of Birth: ____________

2. ___________________________ Date of Birth: ____________

Vehicles at residence (1) Registration Plate ____________ Make/Color ____________________

Vehicles at residence (2) Registration Plate ____________ Make/Color ____________________

Vehicles, if any, used by person home: Registration __________ Make/Color ____________

Contact person [s]: (1) __________________________________________________________________

Address: ________________ City: ________________ State: ____________

Contact phone number [s]: __________________________________________________________________

Contact person [s]: (2) __________________________________________________________________

Address: ________________ City: ________________ State: ____________

Contact phone number [s]: __________________________________________________________________