Emergency Shelter Voucher

As Part of Large-Scale Events Protocols and Procedures

Instructions: This voucher must be completed in its entirety and presented to [insert name] in order to drop off individuals for shelter. The top and bottom portions should be identical. Once completed, present the top portion to organization representative, and keep the bottom portion to submit to the City of Houston.

Name of Event	
Date and Time	
Referring Agency	
Please check one.	
Name of Staff/Volunteer Dropping off	
Phone Number of Staff/Volunteer	
Shelter Location	
Please check one.	
Client's First Name and Last Initial	
Please do not write name in entirety.	
Client Demographic	☐ Single Male
Please check one.	☐ Single Female
	☐ Single Transgender
	Family
	Fold and Cut Here
	Fold and Cut Here
Name of Event	
Date and Time	
Referring Agency	
Please check one.	
Name of Staff/Volunteer Dropping off	
Name of Staff/Volunteer Dropping off Phone Number of Staff/Volunteer	
Phone Number of Staff/Volunteer	
Phone Number of Staff/Volunteer Shelter Location	
Phone Number of Staff/Volunteer Shelter Location	
Phone Number of Staff/Volunteer Shelter Location Please check one.	
Phone Number of Staff/Volunteer Shelter Location Please check one. Client's First Name and Last Initial	
Phone Number of Staff/Volunteer Shelter Location Please check one. Client's First Name and Last Initial Please do not write name in entirety.	
Phone Number of Staff/Volunteer Shelter Location Please check one. Client's First Name and Last Initial Please do not write name in entirety. Client Demographic	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □

