



Familyr Device Set-Up Form

Please complete and email to info@familyr.co.nz

Use digits only for all phone number fields.

A1 should be the person most likely to respond first. You can list 111 as the last contact if you wish.

1. Contact details (Person who completes this form)

Contact name

Phone number (digits only)

Delivery Address

2. Device details

Choose a clear device name. This name appears in the SOS text message. Example: 'Mums Alarm'

Device name

Charging base station location - Street Address or GPS coordinates where the base will stay

3. Emergency contacts

Tick Text, Call, or both for each contact. NO NAMES ARE REQUIRED.

Priority	Emergency Contact Phone number. Numbers only, No Gaps	Text	Call
A1		☐	☐
A2		☐	☐
A3		☐	☐
A4		☐	☐
A5		☐	☐



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3. Emergency contacts continued

Priority	Phone number	Text	Call
A6		☐	☐
A7		☐	☐
A8		☐	☐
A9		☐	☐
A10		☐	☐

4. Quick settings

Side button (non-emergency call) - which priority contact should it call?

Default is A1 if you leave this blank.

Fall detection

Default is ON at medium sensitivity.

☒ Keep ON

☐ Disable

Low battery text alert

Default is ON. It sends a text when battery reaches 15%.

☒ Keep ON

☐ Disable

5. Authorization

Authorized by

Date

By signing, you confirm the above details are correct.