



This is an **OPTIONAL** form for members to use and record details of medical conditions, contacts and permission for others to drive your vehicle in an emergency situation.

It is suggested that it be kept in your First Aid Kit.

EMERGENCY INFORMATION

You may leave blank anything you do not want to disclose.

Name: _____

Address: _____

Medical Conditions: _____

Allergies: _____

Additional comments or conditions: _____

Emergency Contacts:

Name: _____ Phone: _____

Name: _____ Phone: _____

I give permission for a person to drive my motor vehicle in an emergency situation where I am unable to drive.

The information on this form is for **emergency use only** and will be used if you are ill or injured whilst participating in a club activity. The information will be accessed by the Activity Organiser and may be given to relevant medical emergency service personnel.

Signed: _____