

**PERSONAL INFORMATION - For Club members to keep in their rucksacks**

Surname:	First name:
Date of birth:	Blood group:

Any medical condition which may affect emergency treatment :

Current medication:

Other information:

Next of Kin / Contact 1 (Relationship, if any)

Address:

Phone:

Next of Kin/Contact 2 (Relationship, if any)

Address:

Phone:

Name of GP / Practice

Practice address:

Practice phone number:

It is recommended that Club members carry personal I/D such as the above with them on walks