Melbourne Women's' Walking Club: Emergency Contact and Health Form For Day Walks and Multi-Day Walks

This information is for emergency use only and is to be carried in your pack at all times in a sealed plastic envelope. It is your responsibility to update this information if there is a change in details.

The form can be filled in online or printed off and filled in by hand.

Participant Details	
First Name, Surname	
Mobile Number	
Address	
Emergency Contact 1 This needs to be disclosed to the leader who will pass it on to a Club contact person. prior to any multi day activity. Please ensure your emergency contact person is contactable for the whole duration of the trip.	
First Name, Surname	
Relationship	
Mobile Number	
Emergency Contact2 Optional	
First Name, Surname	
Relationship	
Mobile Number	
Health Information Any ongoing medical conditions or health issues that could be triggered while walking need to be disclosed to the Leader <u>prior to all walking activities</u> . Eg asthma, diabetes, blood pressure or heart problems, bite allergies.	
Please detail relevant pre-existing medical conditions or health issues, including management strategies and medication/s.	
Please detail relevant allergies (including food allergies), or reactions to any medication.	
Health Insurance Provider	
Ambulance Cover	Yes No

Privacy Statement: The information contained in this form is for emergency use only, and will be used if you are ill or injured whilst participating in an activity.

As at: 14th August 2021