

9 WGCG Field Trips Health Declaration

It is assumed that you are fit for this weekend, please inform the leader if you do have any problem.

Essential information for your health and safety this weekend please complete-
This will be held in confidence.

Full Name
Address

Contact number/next of kin
Name
Telephone

Medical information that would be needed for medical attention, should you be unable to supply it in an emergency situation.

GP contact

NHS number

Hospital No

This form will be kept securely and only read if necessary.

Please put this form in an envelope, seal and write your name on the outside.
These forms are kept with the First Aid Kit.

(There was an incident in another group where a member collapsed and lack of information caused problems at the time)

29/04/09 CVH