

# Cambridge University Scout & Guide Club

## HEALTH FORM

2011 revision



Due to InTouch, it is no longer *necessary* for members to complete this form and keep it their person during adventurous activities if they do not wish to.

<b>You:</b>	
First name(s): Surname: DOB: Telephone number(s):	Address:
<b>Primary Emergency Contact:</b>	
Name: Relationship to you: Telephone number(s):	Address:
<b>Alternative Emergency Contact:</b>	
Name: Relationship to you: Telephone number(s):	Address:
<b>Your GP:</b>	
Name: Telephone number:	Address:
<b>Medical information (continue overleaf if necessary):</b>	
Date of last tetanus vaccination:	
Dietary requirements:	
Medical conditions:	
Current medication:	
Any other information:	

The above information is correct to the best of my knowledge:

Signed:

Date: