

**Moray Coast U3A**  
**(University of the Third Age in Scotland)**



## Walking Group: Your Personal Information

The U3A respects your personal privacy. However, when you join an organised walk the leader has a legal responsibility for your safety. Please complete this form and place it in a sealed envelope. Please carry the envelope in your rucksack or in a securely zipped pocket in your anorak or cagoule. It will only be opened in a medical emergency in which you become unconscious or appear to be seriously ill.

First name	Surname
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Address Line 1	Address Line 2	Address line 3	Post Code
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Name of emergency contact	Emergency number	contact's phone	
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**Details of known medical conditions.** If you have any regular, prescribed, medication then please include details as this information can often help emergency services to give you the most appropriate treatment. If you know your 10 digit CHI number then include it as in an emergency it will make access to your medical records by health professionals much easier. Use the back of this form if you need more space.

<p style="text-align: center;">CHI Number</p>
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