**LONG DISTANCE WALKERS ASSOCIATION**

**BEDS, BUCKS AND NORTHANTS GROUP**

**EMERGENCY RECORD CARD
 (PLEASE CARRY WITH YOU ON ALL BBN WALKS AND LDWA EVENTS – THANK YOU)**

|  |
| --- |
| **FULL NAME:** |
| **ADDRESS:** |
| **DATE OF BIRTH:** |
| **EMERGENCY CONTACT:**  |
|  Name: |
|  Address: |
|  Telephone: |
|  Relationship: |
| **NEXT OF KIN: (if different to the above)** |
| **BLOOD GROUP:** |
| **ANY KNOWN ALLERGIES:** |