

NATIONAL TWELVE OWNERS' ASSOCIATION

VOLUNTARY MEDICAL DECLARATIONS AND EMERGENCY CONTACT DETAILS

EVENT: **National Twelve Championships 2018 – Brixham Yacht Club**

EVENT DATE: **18th – 21st August 2018**

VOLUNTARY MEDICAL INFORMATION, for your safety, in the event of an accident. This information will be retained for the duration of this event only.

HELM

Any Medical conditions:

Emergency Contact Name:

Telephone:

Address:

.....

*I agree that the above information may be shared with the host club and the emergency services in the event of an emergency during this event solely to assist in any medical treatment. Please circle your choice **YES / NO**

CREW

Any Medical conditions:

Emergency Contact Name:

Telephone:

Address:

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*I agree that the above information may be shared with the host club and the emergency services in the event of an emergency during this event solely to assist in any medical treatment. Please circle your choice **YES / NO**