



## LUGARNO PROBUS CLUB

### Member Travel Information Sheet

**This sheet is to be completed by all Club members participating in a travel outing. It is to be enclosed in a sealed envelope labelled with the member's name and handed to the Travel coordinator prior to the commencement of the outing.**

This information will only be accessed in the event of an emergency or medical incident.

Note: This information can be provided on a separate sheet rather than on a copy of this form.

<b>Member Name</b>	
<b>Medications being taken</b>	
<b>Allergies</b>	
<b>Medical Practitioner Details</b>	
Doctor's Name	
Doctor's Phone Number	
<b>Emergency Contact details for this trip if different to what is currently on file.</b> Note that if this is a permanent change to these details, please notify the Membership Officer	
Emergency Contact Name	
Emergency Contact Phone Number	