

 CUT

FOLD



BritishRedCross

Emergency Contact Card

About you

Name.....

Date of birth.....

Phone number.....

Address.....

Language(s) spoken.....

GP or practice name.....

GP phone number.....

Next of Kin

Name.....

Relationship to you.....
(It can be Family or a Friend)

Phone number.....

Address.....

Language(s) spoken.....

If under 18 yrs, how old are they?

Do they live in UK? (please circle) Yes No

If you have no Next of Kin, please write "No Contact"

FOLD

Additional Emergency Contact

Name.....

Relationship to you.....
(It can be Family or a Friend)

Phone number.....

Address.....

Language(s) spoken.....

If under 18 yrs, how old are they?.....

Do they live in UK? (please circle) Yes No

Have you discussed with your Emergency Contact or family members your wishes if you were seriously ill due to COVID-19?

Please keep this card in your wallet or purse

redcross.org.uk

