



## RCO St Giles Summer Course for Organists 2010

### Medical Emergencies Consent Form

In case of accident or illness the medical authorities may need your personal health information. We may also need to contact your next of kin. Therefore please complete this form and hand to the Course Administrator at the very beginning of the course. It will be held securely and treated in absolute confidence.

Your name and course ID number .....

*Please list any medication, food allergies or health problems of which we or the emergency services should be aware:*

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*If an emergency should arise, it may be necessary to contact a student's next of kin. Please provide the name and address of the person whom we should contact on your behalf.*

Name: .....

Relationship to student .....

Address: .....

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Postcode: .....

Telephone (landline): ..... (mobile): .....

*Please sign and date this form below, and return it with your Timetable Request Form, or bring it with you to the course.*

Signature ..... Date .....