



# CLUBLINK

## **Employee Medical Emergency Information**

*To be kept on-site in employee file*

**Employee  
Name:**

\_\_\_\_\_

**Property:**

\_\_\_\_\_

**Department:**

\_\_\_\_\_

**Address:**

\_\_\_\_\_

**Date of Birth:**

\_\_\_\_\_

**Telephone:**

\_\_\_\_\_

## **Contact in Case of Emergency:**

**Name:**

\_\_\_\_\_

**Address:**

\_\_\_\_\_

**Phone:**

\_\_\_\_\_

**Mobile:**

\_\_\_\_\_