



# EMERGENCY CONTACT FORM 2019

ALL dancers are required to complete this form annually and to **update it whenever your circumstances change**. Please complete and **keep it with you in your dance bag** whenever attending any dance event. We suggest keeping it in a **sealed envelope** marked **EMERGENCY CONTACT INFORMATION**.

## DANCER DETAILS:

Name:.....  
Address:.....Postcode.....  
Telephone No:.....Mobile:.....  
Email:..... Birth Year: .....

**EMERGENCY CONTACT** In the event of an emergency, please contact:

EMERGENCY CONTACT 1	EMERGENCY CONTACT 2
Name:	Name:
Relationship to dancer:	Relationship to dancer:
Contact No:	Contact No:

## BACKGROUND

Any medical history, impairment/limitation/disability you believe should be known by your dance teacher(s) and a treating health or emergency professional:

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RSCDS Adelaide Branch also encourages you to share with your dancing teacher(s) any factor that may impact your dancing capacity or the safety of other dancers.

I acknowledge and commit to adhere to the RSCDS Adelaide Branch Risk Management Policy

(available <http://rscdsadelaide.org.au/wp-content/uploads/2011/07/Risk-Management-Portfolio-final-14-11-15.pdf>)

Signed:..... Dated:.....