

# Bacchus Marsh Pony Club Inc A0001537K

PO Box 701

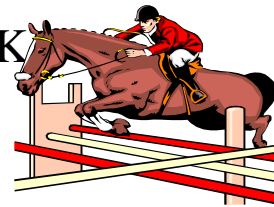
Bacchus Marsh Vic 3340

ABN: 60779163460

**DC:** Tracey Paterson

**Secretary:** Allison Backhouse

Ph: 0408594766



## Medical Form 2009/2010

### Personal Details

Riders Name in Full.....

Address.....

.....

Telephone No's.....

**Name of Doctor**.....

**Address of Doctor/Clinic**.....

**Telephone No. of Doctor**.....

### Medical History.

Do you suffer from any of the following?

- Diabetes .....Details.....
- Epilepsy .....Details.....
- Blackouts .....Details.....
- Asthma .....Details.....
- Heart .....Details.....
- Lung ..... Details.....
- Other (including Kidney)

Please give details.....

Any Allergies

Please give details:

.....

Medication: Do you take any regular

medication.....

Date of Last Tetanus Immunisation.....

Next of Kin.....Relationship.....

Address.....

Telephone no's.....

Horse Car/Float/Truck details:

Make Car/Truck.....Float Make .....

Rego Car/Truck.....Float Rego.....