## Instructions:

\_\_\_\_\_\_

\*In case of emergency (I.C.E.) enables first responders, such as paramedics, firefighters, and police officers to know who to contact in case of an emergency to assist with medical support and information.

\*Keep an I.C.E card in your wallet **and** in your glove box clipped to your insurance/registration.

## IN CASE OF EMERGENCY-I.C.E. IN CASE OF EMERGENCY-I.C.E. **DRIVERS INFORMATION DRIVERS INFORMATION** Driver 1: \_\_\_\_\_\_DOB: \_\_\_\_\_ Driver 1: DOB: \_\_\_\_\_ Phone: Phone: Physician: \_\_\_\_\_ Phone: Physician: \_\_\_\_\_ Phone: \_\_\_\_\_ DOB: Driver 2: DOB: Driver 2: Phone: Phone: Phone: \_\_ Physician: Physician: FREQUENT PASSENGERS INFORMATION FREQUENT PASSENGERS INFORMATION Passenger 3: \_\_\_\_\_ DOB: \_\_\_ Passenger 3: Relationship: Relationship: Passenger 4: DOB: Passenger 4: Relationship:\_\_\_\_ Relationship: I.C.E. Contacts I.C.E. Contacts Contact 1: Contact 1: Relationship:\_\_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: Phone: Phone: Secondary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_\_ Contact 2: Contact 2: Relationship:\_\_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: Phone: Secondary Phone: Secondary Phone: \_\_\_\_\_\_ Contact 3: Contact 3: \_\_\_\_\_ Relationship: Phone: \_\_\_\_\_ Relationship:\_\_\_\_\_\_ Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_\_ Secondary Phone: \_\_\_\_\_\_ Contact 4: Contact 4: Relationship:\_\_\_\_\_ Phone: \_\_\_\_\_ Relationship:\_\_\_\_\_ Phone: \_\_\_\_\_ Secondary Phone: Secondary Phone: \_\_\_

TURN CARD OVER-MEDICAL INFORMATION



**TURN CARD OVER-MEDICAL INFORMATION** 

## **Backside Instructions:**

- \*Complete all necessary medical documentation.
- \*Keep an I.C.E card in your walled **and** in your glove box clipped to your insurance/registration.

MEDICAL INFORMATION	MEDICAL INFORMATION
<u>Driver 2:</u> DOB:	<u>Driver 1:</u> DOB:
Any Known Allergies:	Any Known Allergies:
Medical Diagnosis:	Medical Diagnosis:
Medications:	Medications:
Driver 2: DOB:	Driver 2:DOB:
Any Known Allergies:	Any Known Allergies:
Medical Diagnosis:	Medical Diagnosis:
Medications:	Medications:
Passenger 3: DOB:	Passenger 3:DOB:
Any Known Allergies:	Any Known Allergies:
Medical Diagnosis:	Medical Diagnosis:
iviedications.	Medications:
Passenger 4: DOB:	Passenger 4: DOB:
Any Known Allergies:	Any Known Allergies:
Medical Diagnosis:	Medical Diagnosis:
Medications:	Medications:

Provided by:

Kerr Tar

Area Agency on Aging

Provided by:

Kerr Tar

Area Agency on Aging