

**EMERGENCY  
CONTACT  
DISC**



**Emergency Contact Information**

Name.....

Relation.....

Phone.....

Address.....

**Medical Alert Information**

Name.....

DoB.....

**Medical alert**

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**ATTENTION  
EMERGENCY SERVICES!  
OPEN DISC  
FOR DRIVER DETAILS  
MEDICAL INFORMATION**



**Print on A4 paper**

**Fill out the details**

**Cut out template**

**Place in car tax disc holder**