



PERSONAL REGISTRATION FORM

EMERGENCY IDENTIFICATION SERVICE

Personal Identification Number

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The Information contained in this form could save your life and the life of others.

Please take great care when completing this form, making sure that every number and letter is totally legible.

Title: (Mr/Mrs/Miss/Ms) _____ Surname _____

First Name/s _____

Address _____

_____ Post Code _____

Telephone No. Home _____ Business _____

Mobile _____

PERSONAL IDENTIFICATION DETAILS

Date Of Birth ____/____/____ Height _____

Hair Colour _____ Shoe Size _____

Colour of Eyes _____

Build Small Medium Large

Glasses Contact Lenses

National Insurance No. (if known)

PERSONAL IDENTIFICATION MARKS

Scars, tattoos, birthmarks, moles, distinguishing features, special dental work, etc. _____

PERSONAL IDENTIFICATION AIDS

Jewellery _____

Others _____

PERSONAL MEDICAL INFORMATION

Please list any special Medical Conditions
Diabetes, Epilepsy, Asthma, Haemophilia, etc.
Allergies to Drugs, Anaesthetics, etc.
Heart Conditions, Surgery/ Implants, etc, giving dates.
Medications & Maintenance Drugs taken.

Blood Group (if known) _____

IMPORTANT NOTICE

Doctors/Medical Professionals must always be contacted immediately to verify all the medical details given and their present relevance

Doctor _____

Address _____

_____ Post Code _____

Tel/s _____

Dentist _____

Address _____

_____ Post Code _____

Tel/s _____



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The Information contained in this form could save your life and the life of others.

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DATA PROTECTION ACT

All information given in this form will be treated in the strictest confidence and will only be disclosed to the Police and/or the Emergency Medical Services in the event of an emergency.

NO INFORMATION WILL BE DISCLOSED TO ANY OTHER THIRD PARTY WITHOUT THE WRITTEN CONSENT OF THE CUSTOMER

TERMS AND CONDITIONS

1. This agreement is strictly between LIFELINE EMERGENCY IDENTIFICATION SERVICE LIMITED (The company) and the person signing this agreement (the customer). No contractual responsibilities or obligations shall exist with any other party.
2. All information given by the customer in this agreement will be kept confidential within the company and only disclosed to the emergency services in the event of an emergency situation. All information will be kept and stored in accordance with the terms set out in the company's registration with the data protection act 1998. The company will also keep a hard copy of all the information given to it by the customer.
3. The company's responsibility is to forward all the information given by the customer, to the emergency services once a request has been received following an emergency situation. Information will be sent to the relevant station or headquarters dealing with the emergency.
4. The company will provide continuous telephone cover 24 hours a day, 365 days per year, for the sole use of the emergency services.
5. The company will not be held responsible for any failure of the emergency services to follow up the contacts, or any delays in the response times.
6. The customer is responsible for ensuring that all information given to the company is accurate and kept up to date at all times.
7. The customer accepts that a period of up to 14 days will elapse from the time the company receive the information and/or amendments before entry into the database and company records. This information therefore may not be available to the emergency services during this interim period.
8. All information will be automatically removed from the system and the company records within 7 days of receiving a written request from the customer or the customers next of kin, in event of death.
9. The company reserves the right to remove a customers information and records from the system if payment or renewals fall overdue.
10. The customer shall be responsible for ensuring that all identification cards, keyrings, stickers, labels etc. are kept safe, secure and accessible to the emergency services at all times.
11. The company can never be held responsible for the consequences of any misuse of the identification aids, as it is always the responsibility of the customer to look after them and notify the company immediately if they are stolen, lost, or misplaced.
12. The company will not be held responsible in the event of its failure to communicate information to the emergency services resulting from the failure of third party service providers (eg. Telecom companies, internet service providers, mobile network providers, power companies, etc.)
13. It is the customer's responsibility to ensure that all the contacts named on this form are willing to be contacted in the event of an emergency situation.
14. The company shall not be held responsible if any person is contacted in error by a member of the emergency services.
15. The company shall not be held responsible to the customer or any other party for any loss or damage which may be suffered due to any circumstances which may be deemed beyond and out of the control of the company. The company, however will make every possible effort to provide the Emergency Identification Service.
16. It is agreed by the customer that any claims arising against the company resulting from negligence by the company or it's employees will be limited to actual financial losses and shall in no event exceed the sum of £100
17. The customer has a right to terminate/cancel this agreement within seven days of signing. All sums paid by the customer will be refunded by the company less any costs incurred in reversing the transactions. No refunds will be made by the company after this 7 day period has expired.
18. This agreement shall be governed in all respects by the law of the country in which the agreement takes place. For the avoidance of doubt, in England all agreements are subject to English law and in Scotland, all agreements are subject to Scottish law.
19. This agreement will remain in force for the duration of the customer's membership.

I hereby agree that the information I have provided in this form, may be disclosed to the Police and/or the Emergency Medical Services in the event of an emergency.

I accept the Terms and Conditions as stated above.

Signed _____ Date _____

For Office Use Only

LR ID No.

TL ID No.

RM ID No.

LIFE LINE Emergency Identification Service Limited

PO. Box 999 Birmingham B45 9XP Tel: 07000 070 999 Fax: 07000 090 999