

MedicAlert™ FOUNDATION

MedicAlert™ EMBLEMS

UPDATE FORM (PLEASE PRINT or TYPE CLEARLY)

MEMBER No.....

SURNAME: Mr./Mrs./Miss.....

Other Names.....
(Indicate in parenthesis if name has changes from original application)

Male/Female..... Email.....

Residential Address.....
..... Tel Res:..... Bus:..... Mobile.....

Postal Address.....

Doctor's Name.....

Doctor's Telephone.....

NEXT OF KIN (Person to be notified in an emergency)

Name:.....

Address:.....

Emergency Contact Telephone No:.....

Name of Medical Aid Society.....

Medical Aid No.....

I request a new emblem YES NO

Stainless Steel

EMBLEM REQUIRED (please tick)		
TYPE A	TYPE B	TYPE C
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE TICK YOUR CHOICE

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COLLECT	ORDINARY POST	REGISTERED POST

Processing time of emblem 1 - 2 weeks

An annual fee of..... Will be charged at due date

I enclose remittance: Replacement \$..... Reg. Post..... Ord. Post..... Donation..... Total \$.....

(Subject to alteration. Please add exchange to non - Harare cheques.)

Emergency medical information (as presently engraved on your existing emblem).....
.....
.....

Changes or additional information requested must be certified by your Medical Practitioner, Pharmacist, Optician.
.....
.....

Date..... Medical Practitioner, Pharmacist, Optician's Signature.....

If your MedicAlert™ emblem has been of assistance in an emergency, would you kindly enclose a short statement describing the incident.

Thank you

12 cm 14 cm 16 cm 18 cm 20 cm

KINDLY MARK WRIST SIZE REQUIRED USING THIS SCALE AS A MEASURE



Type A
Necklace with 66cm Chain



Type B
Small Bracelet for Children and Ladies



Type C
Large Bracelet

The above are the standard stainless steel emblems. For the complete range of products contact the MedicAlert™ office.

MedicAlert™ FOUNDATION OF ZIMBABWE
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Lions Clubs in District 412