

GLOBAL FOOTPRINTS EXPEDITION LETTER

Name **Male/Female**

Home Address
.....

Full Name (as shown on Passport)

Passport number **Expiry date**.....

Date of Birth **Age**.....

Emergency contact

Name **Relationship**

Address (if different from above).....
.....

Phone numbers: Home **Mobile**

E Mail address

Medical (Please declare all)

Physical and Mental:
.....
.....

Past or Present injuries
.....

Allergies
.....

Medication

Blood Group (If Known).....

Signature..... **Date**.....

