

MediPAL Card Update Form

Complete all sections <u>IN CAPITAL LETTERS</u> and return with payment to MediPAL, Communications House, 26 York Street, London W1U 6PZ

	<u>About You</u>
First Name	
Last Name	
Date of Birth	
Emergency Contact Nan and Tel No	ne
Tell us	what medication you NO LONGER require on your MediPAL card
1.	
2.	
3.	
4.	
5.	
Tell	us of any NEW medication wish to add or changes to the dosage
6.	
7.	
8.	
9.	
10.	



Additional data that will be added to your MediPAL card

(Capital Letters)

e.g. TYPE 2 DIABETES ALLERGIC TO PENICILLIN HYPERTENSION – since 2014 NHS NUMBER or anything a paramedic should be aware of

1.	
2.	
3.	
4.	
5.	
6.	
7.	
	Holder's Doctor Details
Name	
Address	
Telephone Number	



MediPAL updated card costs £5.99 including FREE P&P to UK

Take advantage of Me	diPAL acces	sories tha	at tell people you car	ry a MediPAL card			
Key fob	Key fob		Number required				
Fridge magnet		£1.99	Number required				
Car sticker		£1.99	Number required				
Clear Wallet and yoyo clip		£2.99	Number required				
EXTRA card		£4.99	Number required				
Your name							
Dispatch address							
Post code							
Email address							
Telephone no. (In case we need to contact you)							
Please make cheques or postal orders payable to MediPAL							
Post to:							
MediPAL							
Communications Hous 26 York Street London W1U 6PZ	e						

Copyright © 2004 -2014 Registered Design 4005411 MediPAL® Registered Trade Mark

Tel: 0845 603 4604