



**World Synchronized Skating Championships® 2010
April 9 - 10, 2010 – Colorado Springs, USA**



**THIS FORM MUST BE RETURNED BEFORE March 18, 2010
Please fill in with type or write in capital letters**

Skater Health Care Form

FORM G

SKATER HEALTH CARE

To improve medical care of each skater at ISU Events, in case of emergency, the ISU Medical Advisors request that the skaters fill out this form prior to the Event or at Registration/Accreditation of each event.

NAME:

PASSPORT NUMBER:

MEMBER:

DISCIPLINE:

EMERGENCY CONTACT

NAME AND NUMBER:

ALLERGIES: YES / NO

If yes, what type (food, medications (penicillin or others), pollen, dust etc):

CURRENT MEDICAL CONDITIONS:

Please list the conditions and any medications required.

Return by March 18, 2010 to:

U.S. Figure Skating Headquarters
c/o Lauren Magliola
20 First St.
Colorado Springs, CO 80906
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Fax: 1.719.635.9548
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