

**ARKANSAS INTERFAITH CONFERENCE CHOIR CAMP 2019**  
**STAFF MEDICAL FORM**

Please return this form by June 1st, 2019, or bring with you to camp.

**Name**\_\_\_\_\_

**Address**\_\_\_\_\_

**City, State & Zip**\_\_\_\_\_

**Home Phone**\_\_\_\_\_ **Work Phone**\_\_\_\_\_

**E-Mail** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**In case of emergency contact:**

**Name**\_\_\_\_\_

**Phone**\_\_\_\_\_

**Medical Insurance Company**\_\_\_\_\_

**Policy Number**\_\_\_\_\_

**I am allergic to**\_\_\_\_\_

**Other information**\_\_\_\_\_

\_\_\_\_\_

**AIC CHOIR CAMP 2019**  
**% Charlie Rigsby**  
**1011 Country Club Road**  
**Arkadelphia, AR 71923**

**E-mail: cr273@aol.com**

Phone: Charlie's Cell - (479) 409-5679

Cindy Tisdale in Little Rock - (501) 664-6786, (501) 244-2204

**In case of accident or emergency, we need the name of a person to contact!!!!**