

The Medical Emergency Action Plan

Club Name:	
Club Address:	
Postcode:	

FIRST AIDER/ HELPER INFORMATION	
Name	Mobile Number

FIRST AID EQUIPMENT AND FACILITY	
Item	Location
Defibrillator	
Stretcher	
First Aid Room	

Access Routes:

1. For Ambulance

2. First Aid Room to Ambulance

3. Pitch to Ambulance

OTHER INFORMATION	
Nearest hospital address: (with Emergency Department) Note: include contact no.	
Directions to hospital:	
Journey time:	
Nearest Walk in Centre (WIC) address:	