

 <p><b>Chigasaki City Emergency Card</b></p>		<b>Family doctor (主治医)</b>	①	Phone number:	
			②	Phone number:	
③	Phone number:				
④	Phone number:				
<p><b>Dial 119 in case of Fire or Emergency</b></p>		<b>Chronic illness (慢性疾患)</b>	<input type="checkbox"/> Diabetes(糖尿病) <input type="checkbox"/> Heart disease(心臓疾患) <input type="checkbox"/> High blood pressure(高血圧) <input type="checkbox"/> Other(s) <input type="checkbox"/> Allergies		
			<p>Please show this card to an ambulance crew</p>		
<p><b>Date 20 . .</b></p>		<b>Current medical treatment (服用中の薬)</b>			
<b>Name 氏名</b>	( M・F )				
<b>Address 住所</b>			<p><b>Emergency contact (Relative, friend)</b></p>		
<b>Phone number</b>			<b>Name</b>	<b>Phone number</b>	<b>Relationship</b>
<b>Date of birth 生年月日</b>					