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| **Your details** | **Your emergency contact person's details** |
|   | **Name** | **Paddler grade/ability** | **Travelling with** | **Mobile phone** | **Medical information** | **Name** | **Relationship (Spouse? /Partner?/ Sister?/ Friend?)** | **Contact number** |
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| **Your details** | **Your emergency contact person's details** |
|   | **Name** | **Paddler grade/ability** | **Travelling with** | **Cellphone** | **Medical information** | **Name** | **Relationship (Spouse? /Partner?/ Sister?/ Friend?)** | **Contact number** |
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