

IT'S YOUR LIFE. IT'S YOUR CHOICE.



IN CASE OF MEDICAL EMERGENCY

I have a Personal Directive and a Delegate who can speak for me, if I am unable to communicate my wishes for myself.

Location of Personal Directive: _____

Delegate: _____

Relationship to Me: _____

Phone: _____

Alternate Delegate: _____

Relationship to Me: _____

Phone: _____

Signature: _____ Date: _____