

# In case of emergency!

Please place next to the telephone

Für den Notfall!  
Bitte neben das Telefon legen

Police ..... 110  
Polizei  
Emergency Services (Emergency Doctor, Fire Service) ..... 112  
Rettungsdienste (Notarzt, Feuerwehr)  
Stroke-Helpline ..... 112  
Schlaganfalltelefon

## MY DOCTOR HAUSARZT

Name .....  
Name  
Telephone Number .....  
Telefonnummer

My name is .....  
Ich heiße  
My Address .....  
Meine Adresse  
My Telephone Number .....  
Meine Telefonnummer  
My Health Insurance Company .....  
Meine Krankenkasse

## Next of Kin Kontaktperson

Name .....  
Name  
Address .....  
Adresse  
Telephone Number .....  
Telefonnummer



|                                                                                                                                                                                          |                                                                                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>In case of emergency!</b><br><b>Für den Notfall</b>                                                                                                                                   | <b>To be kept in your wallet</b><br><b>Zur Aufbewahrung in der Börse</b>                  |
| Police ..... 110<br>Polizei<br>Emergency Services (Emergency Doctor, Fire Service) ..... 112<br>Rettungsdienste (Notarzt, Feuerwehr)<br>Stroke-Helpline ..... 112<br>Schlaganfalltelefon | Name .....<br>Name<br>Telephone Number .....<br>Telefonnummer                             |
| <b>MY DOCTOR</b><br><b>HAUSARZT</b>                                                                                                                                                      | Name .....<br>Name<br>Telephone Number .....<br>Telefonnummer                             |
| My name is .....<br>Ich heiße<br>My Address .....<br>Meine Adresse<br>My Telephone Number .....<br>Meine Telefonnummer<br>My Health Insurance Company .....<br>Meine Krankenkasse        | Name .....<br>Name<br>Address .....<br>Adresse<br>Telephone Number .....<br>Telefonnummer |
| <b>Next of Kin</b><br><b>Kontaktperson</b>                                                                                                                                               | Name .....<br>Name<br>Address .....<br>Adresse<br>Telephone Number .....<br>Telefonnummer |