

To help you to have your spiritual needs attended to as a Catholic when being admitted to any hospital for any reason or in emergency cases, please fill out this card and attach it to your health card.

I, _____

am a Catholic. If my condition is critical, please call a Catholic Priest immediately to attend to my spiritual needs.

I have executed a Power of Attorney for Personal Care. If I am incapable of making any decisions regarding medical care/treatment, please contact my attorney(s).

1 _____ tel: _____

2 _____ tel: _____

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