



You or your Health Care provide indicated to the school that your child has been diagnosed with a life threatening allergy. I have sent home an Allergic Reaction Parent Questionnaire to be fill out that will be helpful for me to take care of your child at school. Please fell it out and return to the school as soon as possible along with the emergency contact information listed below

Emergency Contact Information:

Name	Relationship	Phone Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

In case of emergency (911 Call) my preferred Emergency room would be
