

Every student MUST have an Emergency Card. Please fill out this Emergency Card and bring it with you for registration.

Emergency Card	
Student's Name _____	Bus # _____
Address _____	Grade _____
Phone _____	Lives With _____
Birthdate: _____	
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Contact Info (in case of emergency)	
Father's Work Phone _____	Cell _____
Mother's Work Phone _____	Cell _____
Other _____	Phone _____

Emergency Card (back)	
Allergies _____	
Treatment _____	
Doctor Contact _____	Phone _____
Can child be given Tylenol? Yes No	
If so, what strength? _____	
Anything else we should know? _____	
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If your child needs to take a prescription drug administered at school, please send the original prescription bottle with the amount on it.	