

Please list all persons (other than legal guardians previously listed) who are authorized to remove your child from school. They may be called in case of emergency if a parent cannot be reached. *Anyone the teacher does not recognize will be asked to present photo identification.*

NAME (as it appears on ID)	RELATIONSHIP TO STUDENT	HOME PHONE	CELL PHONE	WORK PHONE

MEDICAL INFORMATION:

Family Doctor: _____
(Name) (Phone #)

Insurance Provider: _____ Group #: _____

Policy Holder's Name: _____ Policy #: _____

Does your child have any known allergies? () Yes () No

Please list any allergies or sensitivities. Be as specific as possible, including symptoms.

Has your child ever been diagnosed with any health condition (such as asthma, diabetes, epilepsy, heart disease, severe allergies, eye or ear problems, etc.)? () Yes () No

Please list any such conditions. Be as specific as possible.

Is the child on any medication that must be taken on a regular basis? () Yes () No

Please list each medication, its dosage, and how often it is taken. This information is necessary in case of any medical emergency.

I, the undersigned, do hereby authorize officials of Calvary Chapel Christian School/ Calvary Chapel Merritt Island to contact directly the persons named on this card and do authorize the named physician(s) to render such treatment as may be deemed necessary in an emergency, for the health of the child. In the event the physician(s), other persons named on this card, or parents cannot be contacted, the school officials are hereby authorized to take whatever action is deemed necessary in their judgment, for the health of the aforesaid child.

I will not hold Calvary Chapel Christian School/ Calvary Chapel Merritt Island financially responsible for the emergency care and/or transportation for said child.

This authorization shall remain effective while the child is enrolled, unless sooner revoked in writing and delivered to Calvary Chapel Christian School/ Calvary Chapel Merritt Island.

Parent Signature: _____ Date: _____