Emergency Allergy Alert / Photo ID Form

This form must be completed upon registration and whenever there is a change in the medication. We also require this form and picture to be updated annually.

Name: ______________________________________

Location/Program: ____________________________

___________________________________________________________________________________

Life Threatening Allergy to: ____________________________

___________________________________________________________________________________

___________________________________________________________________________________

Symptoms: (specific to your child, 0-15 minutes after consumption or contact): _________________________

___________________________________________________________________________________

___________________________________________________________________________________

Prevention Tips: Please list any detailed info about your child to help prevent an allergic reaction: _________

___________________________________________________________________________________

___________________________________________________________________________________

EpiPen® Location: ____________________________

EpiPen® Expiry Date: ____________________________

(Parents required to replace EpiPen® prior to expiry date)

What to Do:
1. Child should tell you or you will notice one or more of the above symptoms.
2. Lay child down. Inject EpiPen® into child’s thigh at right angle to the leg. Hold for 10 seconds.
3. Remove EpiPen® and massage the area for 10 seconds.
4. Call 911 and indicate that the child is having an anaphylactic reaction.
5. Call Parents / Emergency Contact

Parent’s Name: ____________________________ Phone: Res: ________________ Bus/Cell: ________________

Emergency Contact: ____________________________ Phone: ________________ Relationship: __________

Parent’s Signature: ____________________________ Date: ____________________________

Office Use Only
☐ Office  ☐ Aquatic Staff Room  ☐ Leaders/Instructors  ☐ Waist Pack  ☐ Family  ☐ Other