



Senior All Night Party

Class of 2019

Medical Information

First aid personnel will be present at the Senior All Night Party.. Should an injury occur onsite that would need first aid assistance, please answer the following questions to help guide the personnel to give the best treatment to your daughter.

1) Does your daughter have currently OR in the past any medical conditions that the first aid personnel should be made aware of...for example: history of seizures, diabetes, bleeding disorders, or heart issues, etc? Yes NO

If yes, what condition _____

2) Does your daughter have any allergies (environmental, food, or medication)?

Yes No If yes, list allergan

Is an EpiPen required? Yes NO

NOTE: If an EpiPen is required your daughter needs to bring it to check-in and give it to the first aid personnel to keep should she need it during the event.

3) Is your daughter on any prescription medication? Yes No

If yes, please list all medications _____

Will any medication be required during the hours of the SANP? Yes No

If yes, please have your daughter bring the medication to check-in to give to the first aid personnel for distribution during the evening.

Emergency Contact Name: (other than parent) _____

Emergency Contact Phone: _____ cell or home? _____

Parent Signature _____ **Date** _____

FIRST AID PERSONNEL ONLY (Please place in labeled bag and initial below)

Epipen received at Check-In _____ (initial) **Returned at Check-Out** _____

Medication received at Check-In _____ (initial) **Returned at Check-Out** _____