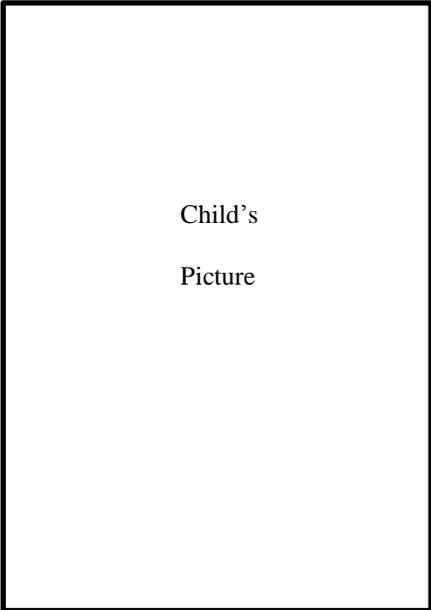


Guide Academy Emergency Card

(Last) _____ Student Name _____ (First)

Teacher _____

ALLERGIC TO



SPECIAL MEDICAL CONDITIONS

PHYSICIAN

IN CASE OF EMERGENCY AND PARENT CANNOT BE REACHED, CHILD CAN BE RELEASED TO:

Name

Name

Phone

Phone

Picked up by:
