

SAFE-T-CHILD FORM

PRINT CLEARLY! WE WILL WEIGH AND MEASURE YOUR CHILD AT SCHOOL.

Child's First Name _____

Child's M.I. _____

Child's Last Name _____

Nickname _____

Height _____ Weight _____

Date of Birth _____

Eye Color _____ Hair Color _____

Right handed _____ Left Handed _____

Parent/Guardian _____

(First and Last Names)

Street Address _____ Apt.# _____

City _____

State _____ Zip Code _____

Phone (area code) _____

Emergency Contacts

Parents work phone # _____

Parents work phone # _____

3rd contact name _____ Phone # _____

Physician Name _____

Physician Phone _____

SCHOOL CARD INCLUDED IN PRICE

Blood Type _____

LISTED BELOW

Identifiers: (Scars, birthmarks, glasses, contacts, braces, pierced ears, Social Security Number, etc.)

Medical Alert: (Drug allergies, diabetes, asthma, medication, etc.)

PARENT COST PER CHILD

1 CARD	\$7.51
2 CARDS	\$11.81
3 CARDS	\$15.03
MUSIC PGM.	\$12.88
RAISING SAFE KIDS BOOK	\$16.10
KNOWLEDGE PGM.	\$31.13
(INCLUDES 1 FREE CARD)	
(CASH, CHECKS, OR M.O. ONLY)	

Parents signature _____

MAKE CHECKS PAYABLE TO SAFE-T-CHILD