## Allergy Information



	Name			DOB/Age	
I have a SEVERE allergic reaction to the following foods that may require EMERGENCY care					
Peanut Tree Nut	□ Dairy □ Egg	Fish Shell Fish	Wheat     Soy     Soy	Other _	
Emergency Contact:					
Allergy Information					
	Name			DOB/Age	
I have a SEVERE allergic reaction to the following foods that may require EMERGENCY care  Peanut Dairy Fish Wheat Other  Tree Nut Egg Shell Fish Soy Other  Emergency Contact:					
Allergy Information					
-	Name			DOB/Age	
I have a SEVERE allergic reaction to the following foods that may require EMERGENCY care					
Peanut Tree Nut	Dairy Egg	Fish Shell Fish	☐ Wheat ☐ Soy	Other _	