

Northwoods Christian Academy



"Let me understand the teaching of your precepts;
then I will meditate on your wonders." Ps. 119:27

610 Hwy 51 S., Hurley, WI 54534 • 1-715-561-2545

Emergency Medical Consent Form

My signature allows staff, or approved volunteers from Northwoods Christian Academy the privilege of providing, or approving emergency medical care for my child(ren).

(names) _____

_____ in my absence.

My contact numbers are as follows:

Mother's Home: _____

Mother's Work: _____

Mother's Cell: _____

Father's Home: _____

Father's Work: _____

Father's Cell: _____

Emergency Contact Name: _____ Phone: _____

Signature: _____ Date: _____