

Name: _____
Phone: _____
Mother: _____
Father: _____
Emergency Contacts: _____

Name: _____
Phone: _____
Mother: _____
Father: _____
Emergency Contacts: _____

PLEASE PRINT CLEARLY.

THIS CARD WILL BE STORED IN OUR EARTHQUAKE SUPPLY KIT
AND WORN BY YOUR CHILD IN THE EVENT OF AN EMERGENCY.

PLEASE PRINT CLEARLY.

THIS CARD WILL BE STORED IN OUR EARTHQUAKE SUPPLY KIT
AND WORN BY YOUR CHILD IN THE EVENT OF AN EMERGENCY.

Name: _____
Care Card: _____
Doctor: _____
Doctor Phone #: _____
Allergies: _____
Special Concerns: _____

Name: _____
Care Card: _____
Doctor: _____
Doctor Phone #: _____
Allergies: _____
Special Concerns: _____