

Kid Emergency Info Card

The ten-second version. Cut, laminate, clip to the bag.

■ **CHILD**

Name _____ Date of birth _____ Weight _____

■ **ALLERGIES**

Biggest first. Reaction + what to do.

Allergy / reaction / plan _____

■ **MEDS**

Medication _____ Dose _____ Time _____

■ **IN AN EMERGENCY, CALL**

1. Name / phone _____

2. Name / phone _____

Pediatrician / phone _____ Pharmacy / phone _____

■ **INSURANCE**

Plan / member ID _____

■ **CONSENT TO TREAT**

Sign + date if your camp or sitter asks.

Parent signature _____ Date _____