

Wausau School District

Authorization of Treatment On Field Trips

TO WHOM IT MAY CONCERN: I authorize treatment by a licensed medical physician/dentist of the following minor in the event of a medical/dental emergency that, in the opinion of the attending physician/dentist, may endanger his/her life, cause disfigurement, physical impairment, or undue discomfort if delayed. The authority granted is only to be exercised after reasonable efforts have been made to reach me if time so permits. This release form is completed and signed of my own free will and is for the sole purpose of authorizing necessary medical treatment under emergency circumstances in my absence.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date Signed

PERSONAL INFORMATION

Name of Student \_\_\_\_\_ Relationship \_\_\_\_\_

Date of Birth \_\_\_\_\_ Date(s) when authorization is valid \_\_\_\_\_

Parent(s) Name \_\_\_\_\_

Address \_\_\_\_\_ Phone (H) \_\_\_\_\_

Phone (W) \_\_\_\_\_

Phone (Cell) \_\_\_\_\_

Family Physician \_\_\_\_\_ Phone \_\_\_\_\_

Specific medical allergies, chronic illnesses, disabilities, or other pertinent medical information:

Prescribed medicine your child is now taking: \_\_\_\_\_

Date of last tetanus immunization: \_\_\_\_\_

OTHER CONTACT PERSON IN CASE OF EMERGENCY

Name \_\_\_\_\_ Phone \_\_\_\_\_

INSURANCE INFORMATION

Hospital Insurance \_\_\_\_\_ Group # \_\_\_\_\_

Surgical-Medical Insurance \_\_\_\_\_ Group # \_\_\_\_\_

Dental Insurance \_\_\_\_\_ Group # \_\_\_\_\_

**PLEASE CONTACT THE SCHOOL HEALTH OFFICE WITH ANY CHANGES TO THIS INFORMATION.**

Special Accommodations

Individuals with disabilities who need special accommodations to participate in this activity should contact the building principal.

The Wausau School District does not discriminate against individuals on the basis of sex, race, religion, national origin, ancestry, creed, pregnancy, marital or parental status, sexual orientation, or physical, mental, emotional, or learning disability. Federal Law prohibits discrimination in education and employment on the basis of age, race, color, national origin, sex, religion, or disability.

December 11, 1991

Revised: April 1999 / August 2007