



## LDS Allergy Form

Parents:

Allergies, especially food allergies, are extremely dangerous. Please complete this form and return it as soon as possible, **even if you child has no known allergies**. There will be an Allergy List posted in the front of each classroom. Please contact the office to add any new allergies as soon as they are discovered.

**Allergy forms must be completed every 6 Months, as allergies can often change through the course of the year.**

Thank you for your cooperation.

Jeannina Manias  
Head of School

Child's Name: \_\_\_\_\_

Class: \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_ No Allergies (check if no allergies)

Food Allergies: \_\_\_\_\_

\_\_\_\_\_

Drug Allergies: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

All Other Allergies: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_