A group of people in different colors

Description automatically generated with low confidence

**New Allergies**

Please use this form to let the school know of any new allergies your child has developed as soon as possible.

|  |  |
| --- | --- |
| **New Allergy** | |
| Name of child |  |
| Date of birth |  |
| Known allergy to |  |
| Reaction |  |
| Action to be taken |  |

Signed: Print Name:

Relationship to child: Date: