

4<sup>th</sup> September 2009

Dear Parents

We would be grateful if you would complete the following medical slip about your child, by Friday 11<sup>th</sup> September. We use this up to date information to create a medical list for all staff.

Many thanks.

Mrs Zimmerman  
Headteacher

.....  
Medical information

Name of child..... Class.....

My child does / does not have any relevant medical conditions. (delete as appropriate)

Suffers from:

Asthma .....

Symptoms.....

Medication Needed.....

Allergies (please list) .....

Symptoms.....

Medication Needed.....

Any other medical conditions (please list).....