



Heritage Christian School

907 Badke Road, Kelowna, BC V1X 5Z5
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A ministry of the Kelowna Christian Center Society

HOME CONTACT CARD 2017-2018

1. Student Information

Student(s) Name	Grade	Care Card Number	Health: Also see below
_____	_____	_____	<input type="checkbox"/> Good <input type="checkbox"/> Concern
_____	_____	_____	<input type="checkbox"/> Good <input type="checkbox"/> Concern
_____	_____	_____	<input type="checkbox"/> Good <input type="checkbox"/> Concern
_____	_____	_____	<input type="checkbox"/> Good <input type="checkbox"/> Concern

2. Emergency Contact Information

Persons to be contacted in emergency (other than parent, in order of preference):

Name: _____ Relationship: _____ Can Pick Up from School

Home #: _____ Work #: _____ Cell #: _____

Name: _____ Relationship: _____ Can Pick Up from School

Home #: _____ Work #: _____ Cell #: _____

Other persons (and relationship) to whom we are authorized to release the student(s) from school:

3. Health Information

Doctor's Name: _____ Phone: _____

Chronic health conditions the child has (i.e. asthma, diabetes, epilepsy, allergies):

Student(s) Name:	Description of Condition	Medication Required:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Will the school be required to administer medication? Yes No

If yes, please see the office for forms to be filled out by the guardian and the child's doctor.

Parent or Guardian Signature: _____ Date: _____

NOTE: All information on this card is kept strictly confidential.