

FOOD ALLERGY INFO

NAME: _____

Cannot have:

SYMPTOMS OF REACTION:

MILD:

____ red blotchy skin ____ hives
____ watery eyes ____ itchy skin

WHAT TO DO:

SEVERE:

____ spreading hives ____ vomiting ____ wheezing
____ difficulty breathing ____ tingling, swelling tongue
____ shock (clammy skin, pale grey color)
____ swelling of face or neck

WHAT TO DO:

Parent signature: _____

Home phone number: _____

Cell phone number: _____