

**PRAIRIE-HILLS ELEMENTARY SCHOOL DISTRICT 144**

3015 West 163<sup>rd</sup> Street  
Markham, IL 60428  
708-210-2888

**STUDENT MEDICAL FORM**

**Student's Name:** \_\_\_\_\_ **School:** \_\_\_\_\_

**Allergies:** \_\_\_\_\_

**Medications:** \_\_\_\_\_

**Medical Considerations:** \_\_\_\_\_

**Asthma:**      **Yes**      **No**

**Emergency Contacts:**

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Dr.:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name and ages of brothers and sisters attending Prairie-Hills School District 144:**

\_\_\_\_\_

**Parent Name Print:** \_\_\_\_\_

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