



**ANNUAL HEALTH RECORD 2017-2018**

**HEALTH CONDITIONS**

**Student Name**

Allergies  Food  Medication  Asthma

Other (Please List)

Please explain any answers checked above: *(Additional paperwork may be required)*

**Do any health and/or medical conditions require school restrictions, modifications and/or intervention?**

YES  NO

If YES, please explain:

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Please explain any answers checked above: *(Additional paperwork may be required)*

**Do any health and/or medical conditions require school restrictions, modifications and/or intervention?**

YES  NO

If YES, please explain:

Physician's Name:

Phone:

Emergency Contact:

Phone:

***If you need additional copies of this page please contact the school office***

# Wolsey-Wessington School District Permission Form

Please read the attached documents, then sign, date and return this form

Print Student Names

Parent/Guardian Signature

Date

## **Student Assignments/Work:**

- I GIVE MY CONSENT for my student's work (papers, videos, etc) to be shared via the internet on a website or wiki. Student's full name will not be shown.
- I DO NOT GIVE MY CONSENT for my student's work to be shared via the internet on a website or wiki.

## **Media Appearance:**

- I GIVE MY CONSENT for my child to be in various photographs, slides videos, and television participation. These may appear in various publications, presentations, the Wolsey-Wessington School District website, Facebook and Twitter pages and/or showing on television.
- I DO NOT GIVE MY CONSENT for my child to be in any media within the District.

## **Field Trip:**

- I GIVE MY CONSENT for my child to go on activity/field trips from time to time during the school year for educational purposes, and that my child may go or remain in school, depending on my wish. Unless I so advise the teacher in writing in the case of a particular proposed trip, it is my desire that my child shall take such excursions and trips. It is understood that I hereby release the teachers and principal of the school from liability for any injury my child may sustain in such trips or excursions and agree to hold said teacher and principal blameless, beyond exercise of due care and caution in the event of any such injury.
- I DO NOT GIVE MY CONSENT for my child to go on activity/field trips.