



## SPECIAL MEDICAL INFORMATION

**Student(s) Name**

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You, the parent(s) or guardian(s) of the child named above, agree that it is your responsibility prior to enrollment or upon diagnosis to bring to the School's attention your child's sensitivity to any conditions or substances which may cause an allergic reaction, as well as any accommodations which are reasonably necessary for health reasons. While the School will make requested reasonable accommodations consistent with applicable law, it cannot guarantee that your child will not be exposed to substances which may cause an allergic reaction. You hereby release the School from any and all claims, which are not the result of the School's negligence, arising out of your child's exposure to substances or environmental conditions to which your child may be allergic.

If your child does have such a sensitivity you have previously submitted, or simultaneously are submitting, the "Upland Emergency Form" provided to you.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_ 2008

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_ 2008

**THIS FORM MUST BE RETURNED WITH THE ENROLLMENT CONTRACT.**