|  |  |
| --- | --- |
| *Emergency Contact* | |
| *Parent/Guardian 1:* | ***Parent/Guardian 2:*** |
| *Relationship 1:*  *Relationship 2:* | ***Mobile:***  ***Mobile:*** |

|  |  |
| --- | --- |
| *Current School/Nursery* | |
| *Name and Address:* | ***Contact Details:*** |

|  |  |
| --- | --- |
| *Allergies* | |
| * *No – I have no known allergies* | * ***Yes – I have allergies (please specify)*** |

|  |  |  |  |
| --- | --- | --- | --- |
| *Family History* | | | |
| * *Cardiovascular* | * ***Hypertension*** | * ***Asthma*** | * ***Cancer*** |
| * *Diabetes Type 1* | * ***Diabetes Type 2*** | * ***Lung Disease*** | * ***Sickle Cell*** |
| * *Anaemia* | * ***Mental Health*** | * ***Other*** | * ***No Family History*** |
| *Please provide us with any significant health conditions you may have:* | | | |
| *Please provide us with any mediation you are currently being prescribed:* | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| *Ethnicity* | | | |
| * *White – British* | * ***Mixed – White and Black African*** | * ***Black – British*** | * ***Asian – Indian*** |
| * *White – Irish* | * ***Mixed – White and Asian*** | * ***Black – African*** | * ***Asian – Pakistani*** |
| * *White – Scottish* | * ***Mixed – Any other Mixed background*** | * ***Black – Caribbean*** | * ***Asian – British*** |
| * *Other (Specify):* | | | |

|  |  |
| --- | --- |
| *Language* | |
| *Main spoken language:* | ***Will you require an interpreter?*** |