

"Raising the Standard"

Medical Release Form

if

Dear Parents

Dear Farence,	
If you feel that your child's medical condition is not s doctor's instruction or medication, please sign below (releasing nurse and school in case of emergency). P your child's condition does or does not require medic doctor.	and return to the school nurse lease check below to indicate if
YES, my child will require additional medical in instructions upon registration, at back to school first day of school.	-
NO, my child does not require medical instruct	cions.
Child's Name:	Grade:
If assistance is needed in this matter, please contact regular hours.	the school nurse during
For children enrolled in St. Martin schools contact:	Jennifer Necaise, R.N. (SMHS,SMMS,SMUE) 228-875-8418 Ext. 612 Jennifer Clark, RN (SMEE,SMNE) 228-875-3204
For children enrolled in East Central schools contact:	Lori GoodNight, R.N. (ECLE/ECHS) 228-588-7066 Cindy Pry (ECUE/ECMS)
For children enrolled in Vancleave schools contact:	228-588-7024 Debra Salter, R.N. 228-826-5902
Parent/Guardian Signature	 Date