## HASLET ELITE LEARNING CENTER Allergy/Food Exemption Medical Statement

Child's Name			
Length of time for food exemption			
Allergy:	Reaction:		
Foods to avoid	Substitute foods		
Parent's Signature:		Dat	e
Doctor's Signature:		Dat	e
HASLET EL Allergy/Food Ex	ITE LEARNING CENTER cemption Medical Statement		Office Cop
HASLET EL Allergy/Food Ex Child's Name	ITE LEARNING CENTER cemption Medical Statement	eate	Office Cop
HASLET ELI Allergy/Food Ex Child's Name Length of time for food exemption	ITE LEARNING CENTER cemption Medical Statement	ate	Office Cop
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HASLET ELI Allergy/Food Ex Child's Name Length of time for food exemption Allergy:	ITE LEARNING CENTER cemption Medical Statement  D  Reaction: Substitute foods	ate	Office Cop