Life Threatening Allergy Parent Agreement Page

Mitchell Road Christian Academy is **NOT** Allergen Free or Peanut Free. Therefore, Mitchell Road Christian Academy is **NOT** guaranteeing that a student will **NOT** be exposed to peanut or other food allergens in the school environment, on a field trip, or on school retreats.

As the parent and/or guardian I understand and agree to the following by July 31st of each school year:

- I will provide a Mitchell Road Christian Academy Allergy Action Plan (AAP) completed by a medical professional to the nurse regarding the specific allergen that affects my child.
    - This documentation will include:
        - A **current** picture of my child.

- I will provide at least two Epinephrine emergency medications to the nurse in their original labeled boxed container for my child.

- MRCA will provide chewable Benadryl (Diphenhydramine) to be used as needed at school. If a different antihistamine is prescribed, the parent/legal guardian will provide it to the nurse.

- **Students who do not have an AAP and/or their Epinephrine emergency medications turned into the MRCA nurse, will not be able to attend until they are provided.**

- **If my child is interested in trying out for a sport, prior to tryouts the following must be in place in order for my child to tryout.**

    - Their AAP must be on file with the nurse.
    - An additional Epinephrine emergency medication must be provided for their coach to carry unless my child has written permission from their physician to self-administer and have their emergency medication with them at all times.

Preschool and Elementary students will have one of their emergency medications stored in the classroom "Emergency Red Bag" and one in the lunchroom. Middle school students will have one of their emergency medications stored in the middle school office and one in the lunchroom.

If deemed necessary by medical professionals and so indicated on the Mitchell Road Christian Academy Allergy Action Plan (AAP), your child may also keep an EpiPen with him in addition to the locations listed above.

I _____, parent of _____, have read and agree to abide by Mitchell Road Christian Academy's Life-Threatening Allergy Policy.

_____ _____

Parent Signature Date