Child Emergency ID Card

Full Name _____
Nickname(s) _____
Age _____
Current Address _____
City / State / Zip _____
Cell Phone _____
Primary Guardian's Name _____
Primary Guardian's Phone _____
Secondary Guardian's Name _____
Secondary Guardian's Phone _____
SSN _____

School _____
Phone _____ Grade _____ Room _____
Teacher _____

Date of Birth _____
Gender _____ Ethnicity _____
Height _____ Weight _____
Hair Color _____ Eye Color _____
Birthmarks/Distinctive Moles _____

Scars _____
Other (glasses, contacts, braces, prosthetics, etc)

Allergies _____
Medical Conditions _____
Medications _____
Blood Type _____
Pediatrician _____

Other Info _____

Today's Date _____

Full Name _____ Date of Birth _____ Age _____

Date Picture Taken _____

Date Picture Taken _____

Child's Emergency ID Card: Print file, trim around border. Fold on dashed line and glue or tape sides together. Attach photos, and laminate card.

Adult Emergency ID Card

Full Name _____

Nickname(s) _____

Age _____

Current Address _____

City / State / Zip _____

Cell Phone _____

Emergency Contact's Name _____

Emergency Contact's Phone _____

Secondary Contact's Name _____

Secondary Contact's Phone _____

SSN _____

Employer _____

Phone _____

Address _____

Date of Birth _____

Gender _____ Ethnicity _____

Height _____ Weight _____

Hair Color _____ Eye Color _____

Birthmarks/Distinctive Moles _____

Scars _____

Other (glasses, contacts, braces, prosthetics, etc) _____

Allergies _____

Medical Conditions _____

Medications _____

Blood Type _____

Physician _____

Other Info _____

Today's Date _____

Full Name _____ Date of Birth _____ Age _____

Date Picture Taken _____

Date Picture Taken _____

Adult's Emergency ID Card: Print file, trim around border. Fold on dashed line and glue or tape sides together. Attach photos, and laminate card.

Pet Emergency ID Card

Animal Type _____
Pet Name _____
Nickname(s) _____
Age _____
Microchip Number _____
Rabies Tag _____
Tattoo ID _____

Current Address _____
City / State / Zip _____
Contact's Name _____
Contact's Phone _____
Secondary Contact's Name _____
Secondary Contact's Phone _____

Date of Birth _____
Gender _____ Breed _____
Weight _____ Eye Color _____
Hair Color _____
Markings _____
Scars _____

Allergies _____
Medical Conditions _____
Medications _____
Veterinarian _____

Other Info _____

Today's Date _____

Name _____ Age _____ Microchip Number _____

Date Picture Taken _____

Date Picture Taken _____

Adult's Emergency ID Card: Print file, trim around border. Fold on dashed line and glue or tape sides together. Attach photos, and laminate card.