



attach photo

- Update it annually
- Make it a clear frontal face
- Mark the month/year taken on back
- Store full-body or additional photos in a sheet protector with this.

2.5"X3.5"

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child family member vitals

First: _____

Middle: _____

Last: _____

Alias: _____

Height: _____ Weight: _____

Eyes: _____ Hair: _____

Birthmark: _____

Other Marks: _____

Misc: _____

DOB: _____

SSN: _____

DL: _____

Car: _____

Allergies: _____

Medications: _____

Other: _____

Grade: _____

School: _____

Secondary: _____

Cell: _____

Dentist: _____

Doctor: _____

RIGHT THUMB

RIGHT INDEX

RIGHT MIDDLE

RIGHT RING

RIGHT PINKY

LEFT THUMB

LEFT INDEX

LEFT MIDDLE

LEFT RING

LEFT PINKY