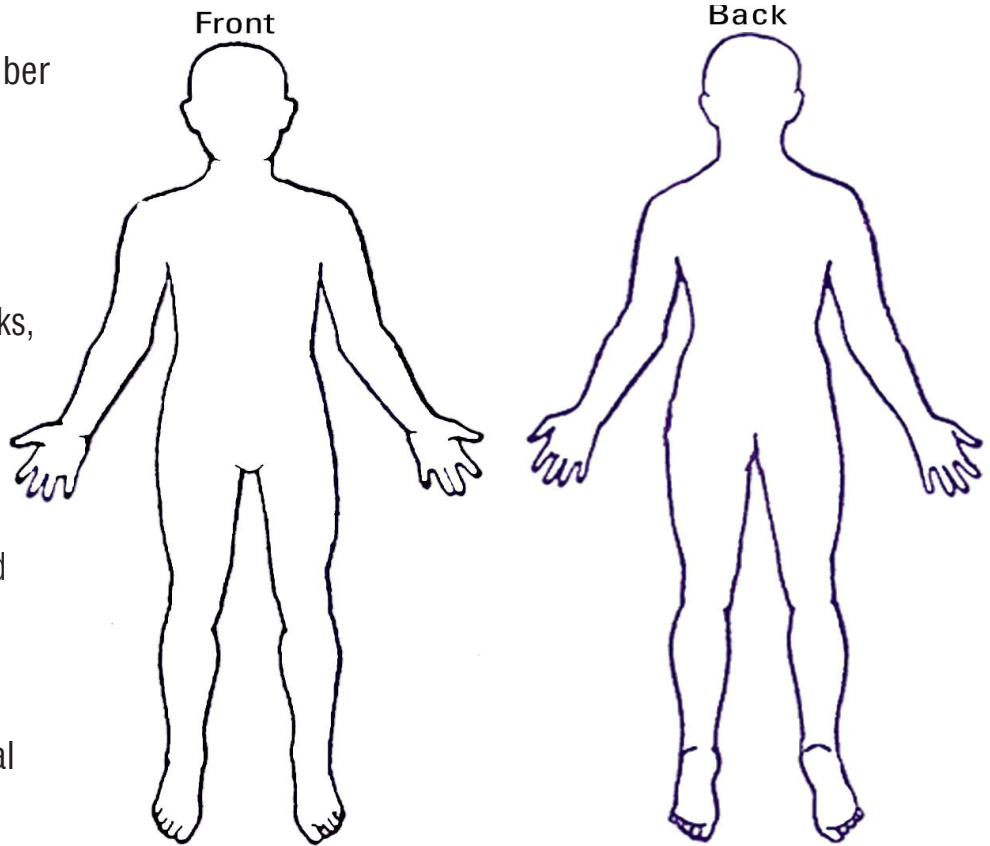


Print one for each family member on card stock (perferred).

Use Diagram To Denote Birthmarks, Scars, Piercing, Glasses, etc.

Store in S.A.F.E.ID Online Album and place originals in 9x12 envelope.

Follow directions on the "How To Use" Physical Material page for Fingerprinting



R. THUMB	R. INDEX	R. MIDDLE	R. RING	R. LITTLE
L. THUMB	L. INDEX	L. MIDDLE	L. RING	L. LITTLE
L. FOUR FINGERS SIMULTANEOUSLY		L. THUMB	R. THUMB	R. FOUR FINGERS SIMULTANEOUSLY

Print, complete information, store in SAFEID Online Album, place originals in 9x12 envelopes and give copies to designated adults. All information should be updated every six months, for children under 6 years, adults with alzheimer's/dementia and yearly for children older than 6.

Date: _____

Family Member's Name : _____

Address: _____

City/State/Zip: _____

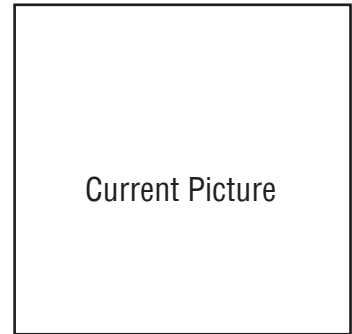
Telephone: _____

Age: _____ Gender: _____ Date of Birth: _____ Blood Type: _____

Place of Birth: _____ Social Security # : _____

Weight: _____ Height: _____ Hair Color: _____ Eye Color: _____ Race: _____

Other Identifying Marks (braces, glasses, scars, birthmarks, earrings, body piercing, etc.) _____



Current Picture

Photo taken _____

Medical: Allergies _____ Chronic Illness: _____

Current Medications: _____

Doctor's Name: _____ Telephone: _____

Other Pertinent Info: _____

Have dentist complete this chart on your child's next visit.

Dentist's Name: _____ Telephone: _____

