## **Allergy Information Disclosure Sheet**

| Full Name           |          |                  |  |
|---------------------|----------|------------------|--|
|                     |          |                  |  |
|                     |          |                  |  |
| Date                |          |                  |  |
|                     |          |                  |  |
|                     |          |                  |  |
| Contact Information |          |                  |  |
|                     |          |                  |  |
|                     |          |                  |  |
| Known Allergies     | S        |                  |  |
| Allergen            | Reaction | Treatment/Action |  |
|                     |          |                  |  |
|                     |          |                  |  |
| Additional Infor    | mation   |                  |  |
|                     |          |                  |  |
| Signature           |          |                  |  |
|                     |          |                  |  |