

**Ontario Envirothon Championship  
Emergency Information Form**  
**(To be completed by all advisers)**

In order to ensure participation in the program, this form must be returned to Forests Ontario no later than upon arrival at the Ontario Envirothon Championship

1. **(Name)** \_\_\_\_\_
  
2. Emergency Contact:  
*Name:* \_\_\_\_\_  
*Relation:* \_\_\_\_\_  
*Phone number:* \_\_\_\_\_
  
3. Health Card Number: \_\_\_\_\_
  
4. Allergies (medical, food, insect):
  
  
5. Health Concerns:
  
  
6. Medication(s):