

Our Lady of the Ridge-St. Linus Religious Education/Faith Formation

office: 10300 South Lawler Avenue, Oak Lawn 60453 Faith Formation bldg: 10859 Ridgeland Chi Ridge 60415
Telephone (708) 422-2400 x 139 Mon-Fri Telephone (708) 424-4440 Sat am (no vmail)
email: religioused@stlinusschool.org

Medical Information Authorization for Medical Treatment

Name of Child	Grade in Sept. 2026	Medical allergies	Year of Last Tetanus Shot

Name of Physician _____ Phone _____

Address _____ City _____

Medical Insurance Company _____

Insurance Number _____ Group Number _____

Other contact in case of emergency:
(please select someone who is available during RE classes)

Name _____ Phone _____

Relationship to child _____

Mother cell phone _____ Father cell phone _____

Medical Release

In the event that the undersigned or my (our) authorized physician, cannot be reached and in the judgment of the Director of Religious Education, other person responsible for the program/group or other appropriate staff member, there is a necessity for immediate examination and/or treatment of my (our) child, I (we) hereby authorize any of the aforesaid personnel to obtain for my (our) child such medical services as are deemed necessary.

This release is effective from SEPT 2026 through May 2027

Parent Signature Date

Parent Signature Date