Barbara Neilly
Principal

Heather Webster
Assistant Principal

Conners Emerson School
11 Eagle Lake Road
Bar Harbor, Maine, 04609
www.ces.barhbr.org
(207) 288-3631 fax:(207) 288-4706

Please have the following filled out by your child's physician and return it to school. **Please attach a copy of current immunizations.**

Child's Name _____ **DOB**_____

Skin:

Eyes:

Ears:

Nose:

Throat and Mouth:

Lymph Nodes:

Heart: Chicken Pox Disease HX_____

Lungs: Date-If Applicable

Abdomen: BP_____ PULSE _____

Hernia: Hgt _____ Wgt _____

Genitalia BMI_____ % _____

Menstruation:

Bones and Joints:

Posture:

Allergies:

Recommendations for physical activity.

Full None Restricted

_____ _____ _____

Comments:

_____

Physician's Name: _____ Date:_____

Physician Signature: _____ Ph #: _____