

DC Spring Break Trip
Spring 2020
Health Form"

This form must be completed and returned in person or mail by January 31, 2020, to Northern Illinois University, Department of Political Science, Zulauf 415, DeKalb, IL 60115.

P co g<Ncuw."Hktuv."O kf frg "kpkkcn"

Cfftguu"

Ekq{ " Ucvg" \ kr "Eqf g"

Dktj "Fcvg" I gpf gt" Dnqqf "V{rg"

Do you have any health conditions (i.e. allergies, chronic conditions) or special circumstances (i.e. religious convictions or legal arrangements) that we ought to know about prior to emergency treatment?

]"""" 'P Q""""]"""" 'I GU'

Kk{ gu "r rgcug"gzr nlp. "kpenwf kpi "cp{ "ewttgpv'o gf lecvkq*u+<"

P co g"cpf "qhhleg"vgrgr j qpg"pwo dgt "qh'{ qwt "r j { ulelcp<"

Name of health/accident insurance carrier(s) and appropriate policy information:

Ecttktg" Rqrle{ 'P wo dgt"

Ecttktg" Rqrle{ 'P wo dgt"

Emergency Contacts:

P co g" Tgrvdkppuj kr" P co g" Tgrvdkppuj kr"

F c{ "Rj qpg"P wo dgt" F c{ "Rj qpg"P wo dgt"

Gxgplpi "Rj qpg"P wo dgt" Gxgplpi "Rj qpg"P wo dgt"

Uli pcwtg" F cvg" Uli pcwtg" F cvg"