



British and Nauvoo Pageants

Medical History Form (Page 1 of 2)



Participation in the Nauvoo/British Pageants is a rewarding and life changing experience. You will benefit most and serve best if your health is suited to the experience. Family members should be prepared to rehearse long hours in all weather conditions including heat, humidity and rain. Please be candid as you fill out the application so we might know how to best serve you as we work together to serve the Lord.

Family Name:			Cast/Crew/Assignment		Home phone	
Address:			City, State, Zip:		Cell phone	
Family Member's Name	1.	2.	3.	4.	5.	6.
Birthdate						
Age						
Gender						
Height						
Weight						
1. Indicate if you are parent or minor child						
2. Do you have any chronic illnesses or health concerns?						
3. Do you require special diet?						
4. Do you regularly take prescription or over the counter medications:						
5. Do you have difficulty walking, running, seeing or hearing?						
6. Do you have any special health needs?						
7. Have you had an Allergic reaction to:	Medications					
	Foods or Plants					
	Insects					
Date of last tetanus immunization. If greater than 10 years, please have one before arriving at pageant.						

