



CASE WESTERN RESERVE
UNIVERSITY EST. 1826

Authorization for Emergency Medical Treatment and
Transportation to Obtain Emergency Medical Treatment

Student Name: _____

Student ID: _____

This form enables parents and guardians to authorize the provision of emergency treatment and transportation for students and guests who are under the age of 18 and who become ill or injured while at Case Western Reserve University when parents cannot be reached.

Name

Telephone

UQLYHUVLW\ +HD
&RXBQLQJ 6HUYLI
'LYLQ RI 6WXGHQW
10900 Euclid Avenue
Cleveland, Ohio 44106-4901
3KRQH
)D[
XKFV#FDVH HGX
DBTFTFUMJGF IFBMUIDPVO