

FILE OF LIFE PROGRAM

- For District Residents Only

File of Life is a free program designed to help **us** help **you**. The File of Life contains important information such as Medical Conditions, Medications, Allergies, Doctors, who to call, and other important information. This information can save your life.

The File of Life is available to all residents of the fire district free of charge. You can stop by our Headquarters to pick up your file of life. If you cannot get to the fire station, please send us an e-mail at _____ or call 815-436-5335 to request a File of Life.

FILE OF LIFE

KEEP INFORMATION UP TO DATE !!
Review At Least Every Six Months !!
MEDICAL DATA REVIEWED AS OF _____ MO _____ YR

Name _____
Address _____
City _____ State _____ Zip _____

Doctor _____ Phone # _____
Doctor _____ Phone # _____

EMERGENCY CONTACTS

Name _____ Phone # _____
Address _____
Name _____ Phone # _____
Address _____

**Critical Medical Information
Made Immediately Available**

Have you had an EKG or Stress Test? _____ Date _____
Recent Surgery _____ Date _____

Do you have an EKG or Stress Test or a DNR form?
YES _____ NO _____ What is it number? _____

MEDICAL CONDITIONS
(Check all that apply)

<input type="checkbox"/> Allergies	<input type="checkbox"/> Medications
<input type="checkbox"/> Asthma	<input type="checkbox"/> Hypertension
<input type="checkbox"/> Diabetes	<input type="checkbox"/> Heart Disease
<input type="checkbox"/> Seizures	<input type="checkbox"/> Stroke
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

If you are not a resident of the District, but you are interested in obtaining a "file of life", there is a \$1.00 donation fee.