

FINGERPRINTS

GO TO YOUR LOCAL HOBBY STORE AND GET A PAD OF INK. NON-WASHABLE (OIL BASED)) INK IS BEST. ROLL YOUR CHILD'S FINGER OVER THE PAD AND THEN ROLL IT ONTO THE CORRECT SQUARE.

RIGHT INDEX
LEFT INDEX

RIGHT THUMB
LEFT THUMB

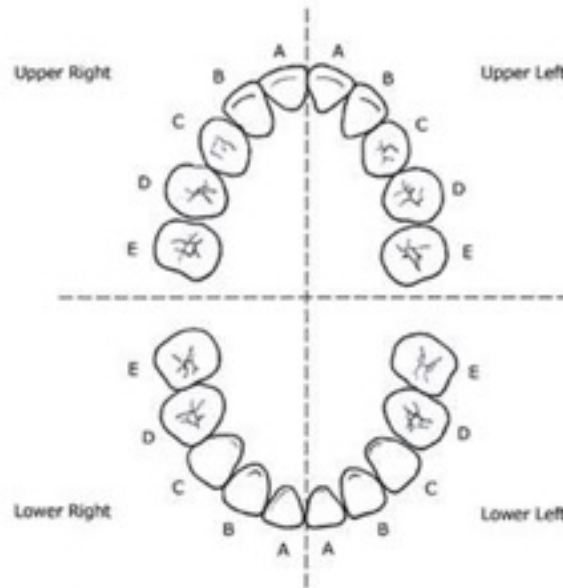
ATTACH
HAIR
SAMPLE
HERE

HAIR SAMPLE

Inspect your child's brush for any hairs that still have the follicle attached. If there are none, gently yank out 1 or 2 strands from your child's head. Attach the strands with a large square of tape.

DENTITION

INDICATE ANY CAVITIES OR MISSING TEETH



KEEP THIS LEAFLET IN A SAFE PLACE

SHOULD THE NEED ARISE
PRESENT IT TO LAW
ENFORCEMENT
IMMEDIATELY

UPDATE YEARLY

THIS CHILD SAFETY KIT
COMPLIMENTS OF
WWW.BIGFITFAM.COM

CHILD SAFETY KIT

Place a recent photo of
your child here.

CHILD'S NAME:

CHILD'S ADDRESS:

PHONE #:_(_____)_____

CHILD'S 2nd ADDRESS IF APPLICABLE:

PHONE #:_()

AGE:_____ DOB_____

GENDER: MALE FEMALE

RACE:_____

EYE COLOR:_____

HAIR COLOR:_____

HEIGHT:_____ WEIGHT:_____

BLOOD TYPE:_____

NATIVE LANGUAGE:_____

MOTHER'S NAME:_____

PHONE #:_()

FATHER'S NAME:_____

PHONE #:_()

ALLERGIES:_____

MEDICATIONS:_____

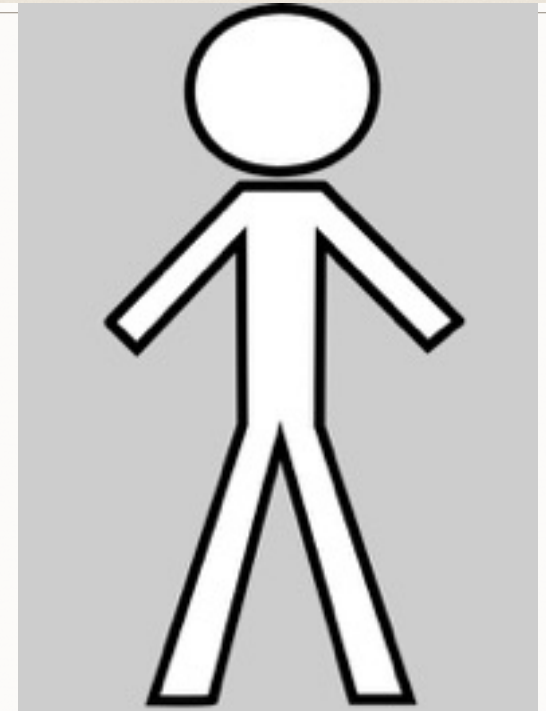
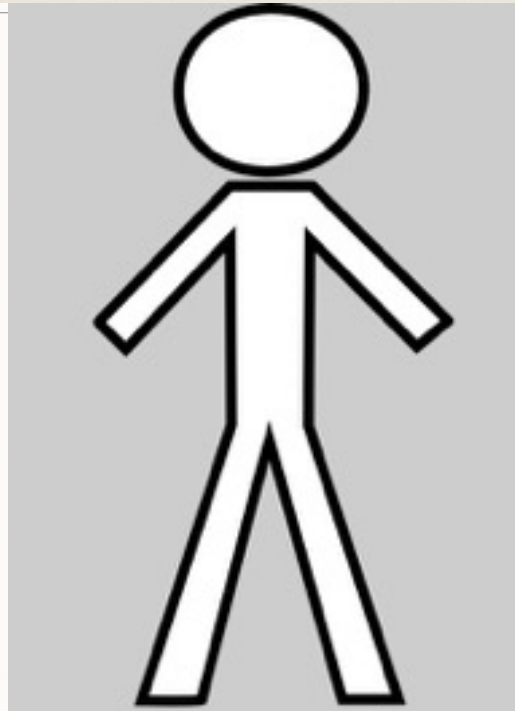
DISTINGUISHING CHARACTERISTICS

On the drawing below please indicate any distinguishing characteristic's your child may have such as scars, birth marks, moles, etc. Describe these characteristics below each figure as well.



FRONT

BACK



DESCRIBE EACH CHARACTERISTIC:_____

ARE THERE ANY OTHER FEATURES OR ILLNESSES AUTHORITIES SHOULD KNOW ABOUT?