



Tomah Baptist Academy, 1701 Hollister Avenue, Tomah, WI 54660 | (608) 372-5288
Web: TBA.TomahBaptistChurch.com | Email:office@tba.tomahbaptistchurch.com

Insurance and Emergency Medical Treatment

My child(ren) are covered under the following Health Insurance Policy:

Name of Policy Holder: _____.

Insurance Company: _____.

Policy Number: _____.

Names of Children Covered:

Tomah Baptist Academy will seek medical attention in the event of an injury. However, all attempts will be made to contact the parent(s) or guardian(s) prior to medical treatment.

Other Emergency Contacts: (in the event that the parent or guardian cannot be reached):

1. Name: _____

Phone Number: _____

Relationship to Family: _____

2. Name: _____

Phone Number: _____

Relationship to Family: _____