



FE125-685 William Ave
Winnipeg, Manitoba R3E 0Z2
Phone: (204) 787-2551
Fax: (204) 787-5040

Food Allergy Education Referral

Child's Name: _____

Date of Birth: _____

Doctor : _____ Ref Dr. _____

Food Allergy: _____

Auto Injector: _____

Parents Name: _____

Address: _____

Postal Code: _____

Phone #: _____

Referral Date: _____