

## EMERGENCY INFORMATION FORM

We are required by the Connecticut State Department of Public Health to have the following information on file at all times while your child is enrolled. Kindly notify us of any changes to the information you give on this form as soon as they occur.

Child's Name: \_\_\_\_\_ Male/Female: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Family Email: \_\_\_\_\_

Mother/Guardian's Name: \_\_\_\_\_

Home Phone (if different): \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address (if different): \_\_\_\_\_

Place of Business: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Father/Guardian's Name: \_\_\_\_\_

Home Phone (if different): \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address (if different): \_\_\_\_\_

Place of Business: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Live-in or Regular Sitter authorized to pick up your child: \_\_\_\_\_

Phone: \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Child's Dentist: \_\_\_\_\_ Phone: \_\_\_\_\_

If the parents are not available in an emergency, the following people are authorized to be contacted to pick my child up from school:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

I give permission for my child named above to be given any necessary first aid procedures by the Playland Nursery School staff, in the event of an accident, illness or personal emergency and any pertinent medical information may be posted in the classroom. I give permission for my child to be transported, if necessary, by a local emergency vehicle (ambulance, fire or police), taken to any appropriate medical facility and to receive medical treatment at that facility. I understand every effort will be made to contact the parents immediately in an emergency. I know that any expenses incurred through transportation and treatments are the responsibility of the parents. I agree to read, understand and adhere to the school policies, including Playland's Behavior Management Policy, as outlined in the Playland Nursery School Parent Handbook.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_