

EMERGENCY PERMISSION CARD

L'il MUNCHKIN PRESCHOOL

604-594-3379 | 14435 85A Avenue | Surrey, B.C. | V3S 5W6

CHILD CARE: _____ PHONE: _____

ADDRESS: _____ CITY & POSTAL CODE: _____

NAME: _____ DATE: _____

HAIR COLOUR: _____ EYE COLOUR _____ BIRTH DATE: _____

CHILD RESIDES WITH: Mother Father Both Guardian OTHER _____

MOTHER'S NAME: _____

WORK PHONE: _____ CELL: _____

FATHER'S NAME: _____

WORK PHONE: _____ CELL: _____

EMERGENCY CONTACT: _____ PHONE: _____

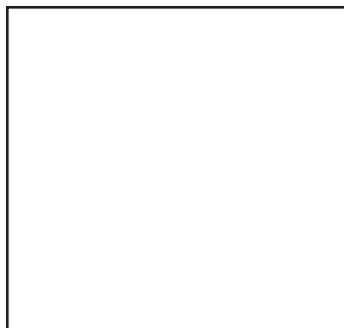
ADDRESS: _____

CHILD'S DOCTOR: _____ PHONE: _____

CHILD'S CARD CARE#: _____ ALLERGIES: _____

MEDICAL CONDITION: _____ MEDICATION: _____

CHILD'S DENTIST: _____ PHONE: _____



Attach Child's Picture

It is the child care's policy to notify a parent when a child is ill or in need of medical attention. Occasionally we are unable to contact parents, and we need to get immediate help for the child. Our procedure is to have the child taken to the nearest emergency service by ambulance. (Ambulance fee is the parent's responsibility).
If an ambulance is not available, the child care provider may choose to transport the child.

I hereby give consent to the child care provider of L'il Munchkin Preschool to make necessary transportation arrangements for my child _____ who has become ill or injured.
name of child

Signature of Parent/Guardian

Signature of Parent/Guardian

Date: _____
d/m/yy

Signature of Child Care Provider/Staff