EMERGENCY INFORMATION AND AUTHORIZATION 2018/2019

Student: _____ DOB: _____

Parents/Legal Guardians: _____

Home Address: _____

Home Telephone number: _____

Mother's work number: _____ cell number: _____

Email: _____

Father's work number: _____ cell number: _____

Email: _____

Guardian's work number: _____ cell number: _____

Emergency contacts if parents/guardians cannot be reached:

Name: _____ Home/work number: _____

Name: _____ Home/work number: _____

Physician/Clinic's Name: _____

Office number: _____

List any and all allergies your child may have:

_____

List any information you think we should know about your child:

_____

_____

List any individuals who are allowed to pick up your child:

_____

_____

List any individual(s) who are NOT allowed to pick up your child:

_____

OVER

It is the general policy of First Christian School to transport to the local emergency room any child who is injured while in our care and requires emergency treatment. This authorization will allow First Christian School to obtain medical care for your child. It will also allow hospitalization, diagnostic testing, surgical procedures, and/or the administration of medications to my child if deemed necessary by a physician in an emergency situation. We will follow this general policy if the person in charge judges that a delay in securing treatment would not be in the best interests of the child. I understand that this authorization does not release the school from the responsibility to properly notify me (or someone designated by me) as soon possible in an emergency.

____ YES, I want the above procedure followed for _____
(Child's name)

I hereby authorize the calling of our family physician, or if not available, another licensed physician at my expense to provide whatever emergency medical or surgical treatment is necessary.

_____

Parent or Legal guardian Date

____NO, I do not want the above policy followed for _____
(Child's name)

I prefer the following procedure: _____

_____

_____

_____

_____

_____

Parent or Legal guardian Date

over