

#1 Required Form

Emergency Information 2022-23



CHILD INFORMATION

First and last name of child	Child's date of birth (month/date/year)
Weight	Allergies* <small>*If your child has a diagnosed allergy, please have your child's doctor fill out the Individual Child Care Program Plan for Child With Allergies form</small>
Please describe any medical needs, or write "none."	
Please describe any medications, or write "none."	
Please describe any dietary needs, or write "none."	

CHILD'S MEDICAL PROVIDER AND MEDICAL INSURANCE INFORMATION

Name of clinic	Name of doctor
Clinic address	Clinic phone number
Medical insurance company	Insurance card ID # or medical assistance ID #

CHILD'S DENTAL PROVIDER AND DENTAL INSURANCE INFORMATION

Name of dental clinic	Name of dentist
Address of dental clinic	Dental clinic phone number
Dental insurance company	Dental Card/Dental Assistance Number

My child currently does not receive dental care.

I give permission to **Joyce Preschool** to take whatever emergency, (e.g., first aid, disaster evacuation, etc. measures are judged necessary for the care and protection of my child while under the supervision of Joyce. In case of a medical emergency, I understand that my child will be transported to an appropriate medical facility by the local emergency unit for treatment if the local emergency resource (Police, Rescue Squad), deems it necessary. My child will be transported at the expense of my child's medical insurance company. I understand that in some medical situations, Joyce staff will need to contact local emergency medical workers before the parent, child's physician, and/or other adult acting on the parent's behalf is contacted.

SIGNATURE OF PARENT OR GUARDIAN

DATE

PARENT INFORMATION – PARENT #1

First and last name of parent #1	Gender	Work telephone
Home address		Home telephone
Email		Cell phone
What is the best way to contact this parent?		

PARENT INFORMATION – PARENT #2

First and last name of parent #2	Gender	Work telephone
Home address		Home telephone
Email		Cell phone
What is the best way to contact this parent?		

ADDITIONAL EMERGENCY CONTACTS & PEOPLE AUTHORIZED TO PICK UP CHILD**In case of an emergency:**

- 1) Joyce will always contact the parents and/or legal guardians of the child first
- 2) If for some reason the parents are not available, Joyce will contact the two individuals identified below.

Additionally, these two individuals are authorized, by the parents, to pick up their child.

PERSON #1

First and last name	Telephone number
Home address	Relationship to child

PERSON #2

First and last name	Telephone number
Home address	Relationship to child

 (SIGNATURE OF PARENT OR GUARDIAN)

(DATE)