



First Presbyterian Nursery School

178 Oenoke Ridge Road, New Canaan, CT 06840 (203)966-5234

EMERGENCY CONTACT/PARENTAL CONSENT FORM

Child's Name _____ Birth Date _____

Address _____ Telephone _____

Mother's Name _____ Cell Phone _____

Business Name _____ Telephone _____

Business Address _____

Father's Name _____ Cell Phone _____

Business Name _____ Telephone _____

Business Address _____

Emergency Contacts: The people listed below are authorized to remove my child from school in case of an emergency.

Name _____ Home Phone _____ Cell _____

Name _____ Home Phone _____ Cell _____

Parent Signature _____ **Date** _____

Physician _____

Address _____ Telephone _____

Dentist _____ Telephone _____

Address _____ Telephone _____

Medications _____

Allergies _____

I give permission to First Presbyterian Nursery School to make whatever emergency (e.g. first aid, disaster evacuation) measures as judged necessary for the care and protection of my child while under the supervision of the school.

Parent Signature _____ **Date** _____

In the case of a medical emergency, the school will call 911, then I will be contacted and then my child's doctor. I understand that my child will be transported to an appropriate medical facility by the local emergency unit for treatment if the emergency resource deems it necessary. My child will be transported at the expense of my agent or myself.

Parent Signature _____ **Date** _____