

Emergency Information and Release

Child's Name	Date of Birth	M	F
		Sex	
Parent/Guardian Name	Parent/Guardian Name		
Home Phone	Work Phone	Home Phone	Work Phone
Address	Address		
City, ST Zip Code	City, ST Zip Code		

Alternative Emergency Contacts

Primary Emergency Contact	Secondary Emergency Contact
Home Phone	Home Phone
Work Phone	Work Phone
Address	Address
City, ST Zip Code	City, ST Zip Code

Medical Information

Allergies/Special Health Considerations

Physician's Name	Phone Number
Insurance Company	Policy Number

I, _____ (parent/guardian's name) give permission for my child
_____ to be treated by an available physician or dentist in case of emergency.

Parent's/Guardian's Signature	Date
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First Aid and Emergency Procedures



Parents and guardians of minors participating in church and preschool activities under staff and volunteer supervision must submit an emergency information and release form by the first day of participation.

Church and Preschool staff are regularly trained in administering basic first aid for incidents that might occur during regular programs, including such minor problems as brush burns, small cuts, chapped lips and bee/wasp/hornet/yellow jacket stings without anaphylaxis. The church and preschool do not employ a professional health care provider and cannot provide ongoing medical care.

If an incident requiring medical attention should occur, every reasonable effort will be made to notify a parent or guardian. In the event of a medical emergency, the child will be taken to a nearby emergency care facility, either by ambulance or staff vehicle. In each case, staff will continue to make efforts to reach a parent or guardian. The same procedures will be followed at off campus programs hosted by Camp Hill Presbyterian Church and Preschool.

Parents and guardians are asked to sign the following release of the Camp Hill Presbyterian Church and Preschool for all claims arising out of the emergency treatment or transportation of their child, except in the case of gross negligence.

Release

I understand that in the event of an emergency involving my child, it may be necessary for a staff person or other representative of the Church or Preschool to administer basic first aid to my child and/or transport my child to an emergency care facility. I hereby consent to the treatment and/or transportation of my child under such circumstances and release the Church or Preschool, its employees, directors, and agents from any claim arising out of or related to such treatment or transportation, except in the case of gross negligence.

Date: _____

(Signature of Parent or Guardian)