

## 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	Work Phone	Home Phone	Work Phone	
Address		Address		
City, ST ZIP Code		City, ST ZIP Code		

## Medical Information

Physician's Name		Phone Number
Insurance Company		Policy Number
Allergies/Special Health Considerations		

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

See back side of paper



## **First Aid and Emergency Procedures**

Preschool employees can only treat students for minor injuries. The school does not employ a health care provider. Minor injuries are those that usually do not require the attention of a physician or nurse and can, with the use of approved first aid procedures, be cared for by the Director or a staff member. They include such minor problems as brush burns, small cuts, chapped lips and bee/wasp/hornet/yellow jacket stings without anaphylaxis. A qualified health care provider must treat more serious injuries.

Each student must submit an emergency information and release form by the first day of school. This form covers information about whom to contact in the event of an emergency, the child's doctor, dentist, insurance and related information. If an accident should occur, every reasonable effort will be made to notify a parent/guardian, or if circumstances otherwise dictate, when an accident occurs at the school, the child will be taken to Penn State Health Holy Spirit Medical Center, if that is necessary. If the child is away from the school on a field trip or other school activity, the same procedures will be followed utilizing the closest medical facility for treatment. In each case, a staff person will continue to try and reach a parent/guardian. It is for this reason it is imperative that all emergency information be correct and be kept current.

Because the school can only treat minor injuries, parents are asked to sign the following release of the Camp Hill Presbyterian 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 Preschool to administer basic first aid to my child and/or transport my child to a hospital, physician's office or other health care facility. I hereby consent to the treatment and /or transportation of my child under such circumstances and release the 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)