

**Meeting House Cooperative Preschool
Emergency Information
2023-2024**

Child's Name _____ Birth Date _____

Allergies _____

Medications _____

Parent/Guardian Contacts

Parent #1 Name _____ Cell Phone _____

Address _____ Business Phone _____

E-mail Address _____

Parent #2 Name _____ Cell Phone _____

Address _____ Business Phone _____

E-mail Address _____

Nanny and Emergency Contacts

Nanny Name _____ Cell Phone _____

TWO Emergency contacts (Nanny, if applicable):

1. _____ Cell Phone _____

2. _____ Cell Phone _____

Any person NOT authorized to pick up your child _____

Parent's Name _____

Parent's Signature _____ Date _____