

## **CHILD INFORMATION CARD**

Child's Name			Birth Date
	Last	First	
be permitted to pick up a child.			r other legal document, both parents listed will
Home Address		Home ph	Work ph
Home Address		Home ph	Work ph
Residence: Child lives with:	□Both parents □Mother only	□Father only	
	□Shared or split custody	Dother	
	s □Mother □Father □Guardian_		
child from the center if necessar	ry.		ergency and have permission to remove my
			Work ph
Name:		Home ph	Work ph
Additional person(s) authorized	to call for my child:		
*		_	
-			Phone
"I give my consent for emerge	ency medical care or treatment,	to be used only if I cannot be	reached immediately."
Parent Signature:			Date
Together Association	CHILD INFOR	MATION CARD	M-10
Child's Name			Birth Date
	Last	First	
<b>Parent or Guardians</b> (Note: un be permitted to pick up a child.)		n writing via a custody order of	r other legal document, both parents listed will
Father		Hours worked	
Home Address		Home ph	Work ph
Mother		Hours worked	
Home Address		Home ph.	Work ph
Residence: Child lives with:	□Both parents □Mother only	•	
	Shared or split custody		
0			
child from the center if necessa	ry.		ergency and have permission to remove my
			Work ph
			Work ph
Additional person(s) authorized	to call for my child:		
	Name		Phone
Address			
"I give my consent for emerge	ency medical care or treatment,	to be used only if I cannot be	reached immediately."
Parent Signature:			Date

## Emergency bag for field trips, walks, and emergency evacuations <u>Recommended items:</u>

- 1. Child Daily Attendance Record and child information card Also suggested: recent picture of each child, family insurance info
- 2. First aid chart or book
- 3. Disposable tissues
- 4. First aid kit: Band-Aids, gauze, tape, scissors, tweezers, thermometer Disposable wipes (without alcohol) Cold compress/ice pack Number to Poison Control Center: 1-800-222-1222
- 5. Blood spill kit: Gauze or clean paper towel Disposable non-latex gloves Plastic bags to dispose of blood stained gauze/materials Clorox wipes (presently the only approved brand)
- 6. Cell phone and/or coins for a pay phone call
- 7. Hand sanitizer for staff until soap and running water is accessible
- 8. Other useful items such as: safety pins, sunscreen and/or insect repellent (signed permission to use must be obtained), wet wipes, diaper, bottle of water, snack items
- 9. Emergency contact info on staff members with the group.
- 10. Other items as recommended by your licensing specialist.

Supporting Families Together Association ~ 700 Rayovac Drive, Suite 6, Madison, WI 53711 Phone 888.713.KJDS ~ Fax 608.441.5399 ~ www.supportingfamiliestogether.org

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