



## Child Emergency Info

Child's Full Name & Birthday: \_\_\_\_\_

Allergies: \_\_\_\_\_

Parents: Together, Separated, Divorced? \_\_\_\_\_

Official Custody Arrangement on file? What is the agreement? \_\_\_\_\_

\_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mother's Cell Phone: \_\_\_\_\_

Mother's Place of Work & Phone Number: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Father's Cell Phone: \_\_\_\_\_

Father's Place of Work & Phone Number: \_\_\_\_\_

Person's Authorized to pick up the child-Name, Best Phone Number to Contact: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Emergency Contacts with best phone # to call (List in the order of who to contact first):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_