

STUDENT EMERGENCY INFORMATION

School Year _____ - _____

Child's Name _____ Date of Birth _____

Address _____

City/State/Zip _____

Telephone _____

Parent's Name (first and last) _____

Telephone Home _____ Work _____ Cell _____

Workplace _____ Work Hours _____

Email _____

Parent's Address (if different from above)

Address _____ City/State/Zip _____

Parent's Name (first and last) _____

Telephone Home _____ Work _____ Cell _____

Workplace _____ Work Hours _____

Email _____

Parent's Address (if different from above)

Address _____ City/State/Zip _____

Persons(s) or Agency Having Legal Custody of Child _____

Home Address/Phone _____

Business Address/Phone _____

Child's Pediatrician _____ Telephone _____

Child's Dentist _____ Telephone _____

Medical Insurance _____ Group Number _____

Allergies, Medical Conditions, Medications, Special Needs _____

Other Emergency Contact (full name) _____ Relationship to child _____
Address _____
City/State/Zip _____
Telephone Home _____ Work _____ Cell _____
Workplace _____

Other Emergency Contact (full name) _____ Relationship to child _____
Address _____
City/State/Zip _____
Telephone Home _____ Work _____ Cell _____
Workplace _____

Persons Authorized to Pick Up Your Child _____

Persons NOT Authorized to Pick Up Your Child _____

(Name of Child) _____ has permission to:

_____ go on walking trips under the supervision of the teacher and attend school field trips throughout the year and be driven in a private vehicle. **(This applies to kindergarten only.)**

_____ receive immediate medical care if an emergency occurs and parents can not be located.*

_____ have first aid administered by a staff trained in first aid.

- The school agrees to notify the parent(s)/guardian(s) whenever the child becomes ill and the parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by the school.
- The parent(s)/guardians agree to inform the school within 24 hours or the next business day after his child or any member of the immediate household has developed a reportable communicable disease, as defined by the State Board of Health, except for life threatening diseases which must be reported immediately.
- Appropriate paperwork such as custody papers shall be attached if a parent is not allowed to pick up the child.
- NOTE: Section 2.1-4.3 of the *Code of Virginia* states that unless a court order has been issued to the contrary, the noncustodial parent of a student enrolled in a public school or day care center must be included, upon the request of such noncustodial parent, as an emergency contact for events occurring during school or day care activities.

Signature of Parent or Guardian

Date

* If there is an objection to seeking emergency medical care, a statement should be obtained from the parent(s) or guardian(s) that states the objection and the reason for the objection