

Consent For Emergency Medical Treatment

As the parent or authorized representative, I hereby give consent to **[INSERT BUSINESS NAME]** to obtain all emergency medical or dental care prescribed by a duly licensed physician (m.d.) osteopath (d.o.) or dentist (d.d.s.) for (Child's Name) _____ Birth Date _____. This care may be given under whatever conditions are necessary to preserve the life, limb or well being of the child named above. Child has the following medication allergies and/or medical conditions: _____

(A) I hereby grant permission for my child to use all of the play equipment and participate in all of the activities at **[INSERT BUSINESS NAME]**. **(B)** I grant permission for my child to leave the daycare premises under the watchful supervision of **[INSERT YOUR NAME(S)]** to go on neighborhood walks. **(C)** I grant permission to **[INSERT YOUR NAME(S)]** to make whatever emergency measures are judged necessary for the care and protection of my child while under their supervision. **(D)** In case of a medical emergency, I understand that my child may be transported to **[INSERT NEAREST HOSPITAL]** by **[INSERT YOUR NAME(S)]**, or by ambulance for treatment, and if the arriving EMT/Paramedics deem it necessary. **(E)** In the event of an accidental ingestion, I understand that **[INSERT YOUR NAME(S)]** will contact the Poison Control Center. I grant permission to **[INSERT YOUR NAME(S)]** to follow whatever directions are given by Poison Control. **(F)** I hereby authorize **[INSERT YOUR NAME(S)]** to act on my behalf in case of an emergency.

Emergency information is kept on file at the daycare. In case of illness or injury this information will be used to notify you or the person designated by you, of your child's status. If your child is injured while at the daycare, first aid will be administered. If treatment by a doctor is necessary, we will make every effort to...

* * * Free Preview End * * *

Purchase Required To Gain Total Access

Visit www.daycareenrollmentforms.com To Purchase *Daycare Enrollment Forms*