Emergency Contact Information Card - JCC Brooklyn Clinton Hill

Child's name:	
Age:	
Date of birth:	

Medical conditions or Activity Restrictions:	
Allergies:	
Current medications:	

Family doctor:	
Doctor's phone:	

Insurance Carrier:	

Parent/Guardian 1:	
Home phone:	
Work phone:	
Cell phone:	
Parent/Guardian 2:	
Home phone:	
Work phone:	
Cell phone:	
Alternate contact's name:	
Home phone:	
Work phone:	
Cell phone:	

If none of the named contacts can be reached, what do you wish the school to do if your child is sick/injured?

**It is understood that in the final disposition of an emergency case, the judgement of the school authorities will prevail. The recommendation of the parent as indicated above will be respected as far as possible.*

Notes:

**A new Emergency Contacts sheet must be submitted yearly, and every time information changes.*