



ACCIDENT / EMERGENCY FORM

Should your child have an accident while in Nursery your child will be assessed by the Nursery Nurse. Should the assessment conclude that URGENT medical treatment is required, we will contact a Government Hospital, and your child will be transported by the hospital ambulance.

The Nursery will make every effort to contact the parents or the Emergency Contact immediately.

Name of Child Class..... DOB.....

Family Doctor Tel no

Medical Insurance..... Card no Expiry

Home Tel no Office no.....

Father's mobile..... Mother's mobile.....

Emergency no. (other than parents).....

I consent/do not consent to (Child's Name).....
being given Paracetamol, should it be necessary by the Nursery Nurse.

Any additional medical information

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Signed Date

