2018 File#_____

Emergency Information Card

Tucson Japanese Language School LLC | 1803 E Seneca St. Tucson, AZ 85719

C/O International School of Tucson

1701 E Seneca St. Tucson, AZ 85719

Child's Name:	**Date Enrolled:**	**Updated:**
Home Address (#, Street, City, State, Zip Code):		**Date Disenrolled**
Home Phone:	**Date of Birth:**	**Sex:** □ **male** □ **female**

Mother or Guardian Name:	**Home Address (#, Street, City, State, Zip Code):**
	Contact Phone Number:

Father or Guardian Name	**Home Address (#, Street, City, State, Zip Code):**
	Contact Phone Number:

I authorize the following individuals to collect my child from the facility in case of emergency or if I cannot be contacted: (at least two contact persons are required)

Name:	**Relationship to child**	**Contact Phone Number:**
Name:	**Relationship to child**	**Contact Phone Number:**
Name:	Relationship to child	Contact Phone Number:
Name:	Relationship to child	Contact Phone Number:

The following individual(s) may NOT remove my child from the facility:

Name(s):

Custody papers have been provided and are on file at the facility. □ Yes □ No

Telephone Authorization Code (Optional):

If Medical care is necessary, call:

Health Care Provider*	Name:	Contact Phone Number:

*A Health Care Provider is a physician, physician assistant or registered nurse practitioner

In case of injury or sudden illness, I requested that this individual be called first:	

Medical Informational

Is child allergic to food or other substances? ◻ No ◻ Yes If yes, describe symptoms, name foods or substances to be avoided, and the procedure to follow if reaction occurs:
Is child usually susceptible to infections and if so, what precautions need to be taken? ◻ No ◻ Yes If yes, list precautions:
Is child subject to convulsions and what should be our procedure if one occurs? ◻ No ◻ Yes If yes, specify procedure:
Is there any physical condition that we should be aware of and what precautions should be taken? (heart trouble, foot problem, hearing impairment, hernia, etc.) ◻ No ◻ Yes If yes, list precautions:
Additional comments:
Other special instructions:

This **Emergency Information card** is accurate and complete, front and back, and was provided by:

Parent/Guardian PRINTED Name:	SIGNED Name:	DATE: