

## Child's Vital Information

This document has important information about your child. It should be given to the person who will take care of your child, or kept with your important documents. You should fill one out for each child.

<b>Child's name</b>	
<b>Date of Birth</b>	
<b>School name and address</b>	
<b>Teacher's name</b>	
<b>Afterschool activities/program information</b>	
<b>Doctor's name</b>	
<b>Doctor's phone number</b>	
<b>Medications</b>	
<b>Allergies</b>	
<b>Medical conditions</b>	
<b>Health insurance</b>	

<b>Family and Emergency Contacts</b>	
<b>Parent 1's Information</b>	Name: Phone Number(s): Address:
<b>Parent 2's Information</b>	Name: Phone Number(s): Address:
<b>Other emergency contact:</b> _____	Name: Phone Number(s): Address: Relationship to child (grandfather, aunt, family friend):
<b>Other emergency contact:</b> _____	Name: Phone Number(s): Address: Relationship to child (grandfather, aunt, family friend):

**Other emergency contact:**  
\_\_\_\_\_

Name:  
Phone Number(s):  
Address:  
Relationship to child (grandfather, aunt, family friend):

**Any additional information or notes for the caregiver:**