

EMERGENCY PROCEDURE

911 will be called! If it is life threatening and confirmed by the fire department, we will take your child to the nearest hospital. I hereby authorize the person in charge to do whatever is in the best interest of my child, to include providing medical care and securing admission to a hospital for treatment and/or emergency surgery. I do not hold CLC Latchkey responsible for any cost including ambulance.

Name of child

Name of child

Parent (signature)