

**INFORMATION FORM**  
**TO BE FILLED by the parents**  
**TO BE GIVEN to the nursery girls**  
**HEALTH RECORD is obligatory**

Name of the parent or representative of the child

Last name of the child

First name

Birth date

Address in the resort

Phone number in the resort

Home address of the parent or representative of the child

Home phone number

Mobile phone number

Does the child have a favourite game, a dummy?

If yes, which one ?

Usual time of the nap

Known allergies

Comments specific observations

Weight of the child

Polio vaccine date

Δ I have read and I agree with the rules of the nursery.

Δ In case of absence of the parent, Mr or Mrs \_\_\_\_\_

will pick up the child.

Δ I undersigned \_\_\_\_\_ parent or

representative of the child

allow

do not allow

the person in charge of the nursery to take measures IN CASE OF EMERGENCY (call the doctor, SAMU...)

Δ allow my child to go to the snow kindergarten

Δ allow the person in charge of the nursery to give paracetamol in case the child has high

temperature (>38,5°C) after having called the parents and having the referent doctor permission

Δ I attest that the above information are correct

Date

Signature