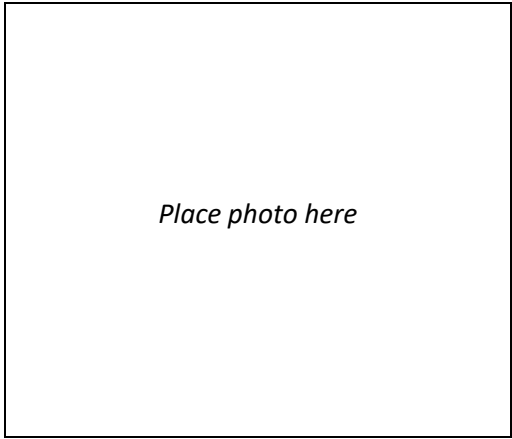


Creative Advantage Childcare

Emergency Card

Child's Name: _____
Gender: _____ Care Card # _____
Child's Date of Birth: _____
Hair Colour: _____ Eye colour: _____
Identifying Features: _____
Height _____ Weight _____
Allergies: _____
Medications: _____



Parents/Guardians/ Individuals Authorized for pick-up:

Name: _____ Relationship _____
Ph# _____ Work# _____
Name: _____ Relationship _____
Ph# _____ Work# _____
Name: _____ Relationship: _____
Ph# _____ Work#: _____

x _____
(Signature)