

Fun-E Farm TOO, INC

3488 Church Road
Gilbertsville, PA 19525

Emergency Contact and Medical Information

Child's Name

Date of Birth

M F
Sex

Parent's/Guardian's Name

Parent's/Guardian's Name

() () () ()
Home Phone Work Phone Home Phone Work Phone

Address

Address

City, State, Zip Code

City, State, Zip Code

Alternate Emergency Contacts

Primary Emergency Contact

Secondary Emergency Contact

() () () ()
Home Phone Work Phone Home Phone Work Phone

Address

Address

City, State, Zip Code

City, State, Zip Code

Medical Information

Physician's Name

Phone Number

Insurance Company

Policy Number

Allergies/Special Health Conditions

I authorize all medical and surgical treatment, x-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver only applies in the event that neither parent/guardian can be reached in the case of an emergency.

Parent's/Guardian's Signature

Date