

DIAMOND BAR COMMUNITY PRESCHOOL
SIBLING NURSERY EMERGENCY RELEASE FORM

We, the undersigned parents of _____ do hereby consent to any treatment and/or hospital service, which may be necessary and rendered to said minor, under the general or specific instructions of:

Doctor: _____ Phone: _____

or those listed below in case of an emergency:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Additionally, we are aware that the said minor is not covered by any insurance policy as covers the students of Diamond Bar Community Preschool. The Nursery operation is a volunteer plan that is not in any way a part of the Preschool operation, and is also not the responsibility of Northminster Presbyterian Church.

Please list any known allergies:

Food: _____

Medication: _____

Parents' Signatures:

Mother: _____ Father: _____

Date: _____