

MEDICAL FORM

NURSERY "LES SATURNINS"

FROM 18 MONTHS TO 3 YEARS OLD



Please fill in this form, print it out and return it to the childminder on the 1st day.

CHILD

First Name :

Last Name :

Date of birth :

Medical information (illness, food allergies, need for assistive devices such as corrective glasses/ hearing aids etc.) :

Mandatory vaccinations DTTP,BCG up to date :

Yes

No

Photocopy of vaccination certificate required

Spoken languages and understandable languages :

Any recommendations from parents (soft toy, nipple, etc.) :

PARENT OR CARER

First & Last name of parent 1 :

First & Last name of parent 2 :

Place of residence during your stay :

Home adress :

Phone Number (**obligatory**) :

Parent 1 :

Parent 2 :

Other people allowed to pick up your child :

1 :

Num :

2 :

Num :

E-mail adress :

I, THE UNDERSIGNED)..... RESPONSIBLE FOR THE CHILD:

I declare that the information given on this form is correct, and authorise the person in charge of the Garderie to take any measures (medical treatment, hospitalisation, surgery) made necessary by the child's condition. I authorise the person in charge to take the child out of the Garderie. I agree to the rules of the Garderie.

Authorise the Esf de Méribel to film and photograph my child, as well as the publication of the image in which my child appears, this on different media (written, electronic, audio-visual) and without limit of time. The use of these photos or videos will be exclusively for publication, promotion and publicity for the exclusive use of the esf de Méribel.

MANDATORY: Presentation of vaccination certificate or photocopy

Date :

Signature :