

INFORMATION FORM

Child

Surname _____

Name _____

Full address

Gender

- Male
 Female

Social Security Number _____

Birth place _____

Nationality _____

Language(s) spoken:

- _____

Previous care center :

PARENTS / GUARDIANS

Father / guardian	Mother / guardian
Surname _____	Surname _____
Name _____	Name _____
Full address, if different from the child: _____ _____	Full address, if different from the child: _____ _____
Private telephone number: _____	Private telephone number: _____
Mobile number: _____	Mobile number: _____
Professional number: _____	Professional number: _____
Email address: _____	Email address: _____
Work schedule: _____	Work schedule: _____
Languages spoken: _____ _____	Languages spoken: _____ _____

**CHILD'S MEDICAL INFORMATION
(A MEDICAL CERTIFICATE HAS TO BE ISSUED IN CASE OF ILLNESS)**

Child's Doctor _____

Phone number _____

Has the child specific needs? (For example: disability, dyslexia, pathology, social or behavioural needs, etc.)

Yes

No

If yes, please explain:

Is the child under medication or receiving a treatment?

Yes

No

If yes, please explain:

Is the child suffering from any known allergies or intolerances? (medication, food or environment)

Yes

No

If yes, please explain:

Is the child having a special diet? (no pork, vegetarian, ...)

Yes

No

If yes, please explain:

Please share any other information on illnesses or incidents that could still affect the child:

AUTHORIZATION FOR CREAMS, DROPS, SPRAYS ...

I allow the childcare centre staff to administer or apply the following to my child if needed:

Please cross the YES or NO column	yes	no
Disinfectant For scratches, wounds, to avoid skin infections Name: OCTENISEPT		
Sunscreen lotion For protection against sunburn and burns Name: LA ROCHE POSAY		
Repellent spray For protection against ticks Name: MOSQUITO PROTECT or MOUSTIMUG		
Physiological serum To clean		
Potassium iodide pill In case of a nuclear incident		

AUTHORIZATION FOR MR OUTING

- I allow my child to participate in outings/activities in Luxembourg. An additional authorization, available at the Biirgerzenter in Bridel, will be required for any other outings/excursions outside the country.

- I do not allow my child to participate in outings/activities in Luxembourg. An additional authorization, available at the Biirgerzenter in Bridel, will be required for any other outings/excursions outside the country.

AUTHORIZATION FOR TRANSPORT

- I allow the staff of the Maison Relais to carry my child in a vehicle which belongs to the childcare centre.

- I do not allow the staff of the Maison Relais to carry my child in a vehicle which belongs to the childcare centre.

Signed in _____ on the _____

Signature(s) of the parent(s) or other legal guardian(s)