

2024-2025 BLAST Extended School Day Program Emergency Information Form

Parent/ legal guardian must complete this form prior to child attending the program.

The BLAST program operates on the school campus, however your child's health information is not shared between the provider agency and the school. In order for BLAST to provide the best possible service to your child, please fill in all necessary information.

Parent/ legal guardian must complete this form in its entirety.

				<input type="checkbox"/> M <input type="checkbox"/> F
Child's Name	Last	First	Middle	Gender

Address	Number	Street	City	State	Zip	Age

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Enrolling Parent Name	Last	First	Middle	Work Telephone	Home Telephone

	()	()			
Parent #2 Name	Last	First	Middle	Work Telephone	Home Telephone

Additional local adults authorized to remove child from program and to be contacted in case of emergency (if parent is unavailable).

Name	Address	Telephone	Relationship
1.		()	
2.		()	
3.		()	
4.		()	
5.		()	

Preferred physician and/or dentist to be contacted in case of emergency

Name	Address	Telephone	Doctor/ Dentist
1.		()	
2.		()	

BLAST Emergency Procedures:

- Step 1. Appropriate staff administers basic first aid
- Step 2. Call 911, if necessary
- Step 3. Attempt to contact parent/legal guardian, and/or emergency contact
- Step 4. Staff accompanies child to emergency facility, if necessary
- Step 5. Staff completes incident, injury/ accident report and submits to parent/guardian

Staff Comments:

Updated:

Date / Initials

Date / Initials

Date / Initials