

## Contact Update Form

Child/ren's name:.....

Parent/Guardian's name:.....

Parent/Guardian's signature:.....

This form is to be used when updating or adding a contact to a family. Contacts can have different typing; one or more of the following in combination.

- EMERGENCY CONTACT
  - Nominate a person (*other than parents/guardians*) to contact in case of an emergency.
- AUTHORISED NOMINEE TO CONSENT FOR MEDICAL TREATMENT AND/OR ADMINISTRATION OF MEDICATION
  - Nominate a person (*other than parents/guardians*) to contact in case of an emergency.
- COLLECTION OF CHILD/REN - *Access will be denied to non-authorised persons*
  - Who, (*other than the parents/guardians*) has permission to collect your child/ren from the educator's home?

### Contact One

New Contact     Existing Contact

*Please tick what type of contact they will be listed as (they can be listed as multiple types)*

Emergency Contact     Medical Consent     Collection of Child

Full Name: .....

Telephone #: (Home)..... (Mobile)..... (Work).....

Email (*required*): .....

Home Address (*required*).....

### Contact Two

New Contact     Existing Contact

*Please tick what type of contact they will be listed as (they can be listed as multiple types)*

Emergency Contact     Medical Consent     Collection of Child

Full Name: .....

Telephone #: (Home)..... (Mobile)..... (Work).....

Email (*required*): .....

Home Address (*required*).....