## Important information for the daycare facility



Please return this sheet to the care team no later than on the first day of care for your child. It will remain in the daycare facility and will not be passed on to third parties.

## Important:

We always need your latest data in order to be able to act and react accordingly, especially in emergency situations. In order to be able to contact you, please make sure to always pass changes on to us immediately. Thank you.

1. Information about the child:					
Last name:					
First name:			-		
Birthday:	y:Hometown:				
Street:					
2. Information a	bout legal gu	ıardians:			
Legal guardians	□ both	☐ Mother	☐ Father	□ other legal guardian	
Name of father:					
Hometown & street	:				
	ne: Email-Address:				
				bout availability, e.g. at work):	
Name of mother: _					
Hometown & Street	::				
Phone.:		Email-Address: _			
Other phone numb	ers for cases of	emergency (with	n information a	bout availability, e.g. at work):	

3. Important addresses	
Pediatrician:	Phone:
Other people elligable of picking up the dians:	he child from the daycare next to already named legal guar
Names (with telephone numbers):	
4. Privacy	
the extent of the use of personal data explicity as part of the concept or ou	nd your privacy. Below we will inform you about the way and in relation of our business processes that may not be listed in homepage: <a href="https://www.postillion.org/websites/einrich">https://www.postillion.org/websites/einrich</a> citly refer to our concept in which we explain the way newslet used as working methods.
The state of the s	filmed during the time at the daycare and that the record- during facility events (e.g. events, parent-teacher con- yes
consent, the legality of processed data Unless the consent is revoked, it appl time, the data will be deleted.	ed at any time for the time following. By withdrawing you a that took place up to the point of revocation is not affected lies for the duration of affiliation with the facility. After tha
Place, Date	Signature of legal guardian(s)

## 5. Other information — Nursery only

I/we agree, that pictures of my/our child may be reproduced and passed or (e.g.press). Not for commercial purposes.	n to thire u yes	•		
My/our child received their vaccination against tetanus	□ yes	□ no		
Important information for the daycare facility (Allergies, illnesses, e.g. Diabetes, convulsions etc.):				
Medication necessary (if yes, please also fill in medication form)	□ yes	□ no		
Without consulting legal guardians, employees are eligible to				
give band-aids, small bandages remove splinters	□ yes □ yes			
from my/our child without liability being established for the employee or the	e holder	of the daycare.		
I/we agree, that the daycare may remove ticks using tick-tweezers or tick-cards without prior consultation with the legal guardian(s). Legal guardians will be informed about it promptly. $\square$ yes $\square$ no				
If you don't agree with an employee removing the tick, you will still be inform	ned imm	nediately about		
the tick.  Note: If you agree, but the pedagogical staff oft he daycare does not feel capable of removing the tick, for example because the bite is in a hard to reach area, the legal guardian(s) will be informed immediately so that everything else can be arranged accordingly.				
In the interest of your child we ask for them to not wear any necklaces or something similiar while in the facility.				
I/we agree that employees may apply sunscreen to my/our child, or, in case of full-daycare, apply sunscreen again in the afternoon (sunscreen brought by you or from the daycare). Please apply sunscreen in the morning before bringing the child in summer. $\Box$ yes $\Box$ no				
My/our child is allergic and may only use the following sunscreen:				
I/we agree that, during the stay at the daycare, my/our child may				
be barefoot inside the facility.	•	□ no		
be barefoot outside (in the garden etc.)	□ yes	□ no		

Place, Date Signature of legal guardian(s)

## ${\it 6.\ Other\ information-Kindergarden\ only}$

I/we agree, that pictures of my/our child may be reproduced and passed o (e.g.press). Not for commercial purposes.	n to third parties □ yes □ no			
My/our child received their vaccination against tetanus	□ yes □ no			
Important information fort he daycare facility (Allergies, illnesses, e.g. Diab	etes, convulsions etc.): 			
Medication necessary (if yes, please also fill in medication form)	□ yes □ no			
Without consulting legal guardians, employees are eligible to give band-aids, small bandages remove splinters from my/our child without liability being established for the employee or the l/we agree, that the daycare may remove ticks using tick-tweezers or tick-c sultation with the legal guardian(s). Legal guardians will be informed.	ards without prior con-			
If you don't agree with an employee removing the tick, you will still be informed immediately about the tick.  Note: If you agree, but the pedagogical staff oft he daycare does not feel capable of removing the tick, for example because the bite is in a hard to reach area, the legal guardian(s) will be informed immediately so that everything else can be arranged accordingly.				
In the interest of your child we ask for them to not wear any necklaces or so in the facility.	omething similiar while			
I/we agree that employees may apply sunscreen to my/our child, or, in case of full-daycare, apply sunscreen again in the afternoon (sunscreen brought by you or from the daycare). Please apply sunscreen in the morning before bringing the child in summer.    My/our child is allergic and may only use the following sunscreen:				
I/we agree that my/our child may be examined by the cooperating dentist during the stay at the daycare	in terms of dental care □ yes □ no			
I/we agree that my/our child may come with an employee (after prior notice	e) during the stay at the			
daycareto go swimmingto go ice skating	□ yes □no □ yes □ no			
I/we agree that, during their stay at the daycare, my/our child may be barefoot inside the facility. be barefoot outside (in the garden etc.)	□ yes □ no □ yes □ no			

Place, Date	Signature of legal guardian(s)