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	:				
	e: 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 child from dians:	the daycare next to already named legal guar
Names (with telephone numbers):	
-	
·	
4. Privacy	
We value the protection of your data and your privace the extent of the use of personal data in relation of explicity as part of the concept or our homepage: tungendatenschutz). Hereby we explicitly refer to outers and the use of video material are used as working	our business processes that may not be listed https://www.postillion.org/websites/einrich r concept in which we explain the way newslet
I/we agree, that my/our child may be filmed during ings may be shown in the facility and during facility ferences)	· · · · · · · · · · · · · · · · · · ·
This consent (privacy) can be revoked at any time consent, the legality of processed data that took pla Unless the consent is revoked, it applies for the dutime, the data will be deleted. The consent (privacy) is voluntary. Unapproval or disadvantages.	ce up to the point of revocation is not affected tration 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)