Child Information Card

1. 2. 3.	Full name Date of birth Parents/ Guardia		PESEL No		
	Mother a) Full name		Father a) Full name		
	 b) PESEL No. c) Place of residence and phone no. d) Place of work and phone no. 		b) PESEL No c) Place of residence and phone no.		
			d) Place of work and ph	none no.	
4.	Information about your child (please circle):				
	 e) needs help with f) signals physich g) uses a potty: h) communicates - gestures and i) in new situation - shy - if none of the j) habits that factorial 	ndently: n ordinary cup: th: blogical needs: s by: d facial expressions ons the child is: - at ease - worr e above, please desc cilitate falling asleep:	yes/ no yes/ no yes/ no eating: washing hands and face: yes/ no yes/ no - uses single words - make		
5.	The child is prone to:				
	a) burping up forb) sobbing uncor		yes/ no yes/ no		
6.		nat we should be av n a medical certificate	vare of, including details of f e:	ood contraindications	
7.	Observations abo	out your child that you	would like to share with us:		

8. DECLARATION OF THE PARENT/ GUARDIAN:

I hereby declare the following:

- 8.1. I have been informed that the child shall not be administered any medicines during his/her stay at the Crèche.
- 8.2. If the Crèche Manager/ Carer informs me that my child has high temperature or other symptoms of illness, he/ she shall be immediately collected from the Crèche by myself or one of the following persons:

Full name	PESEL No.	phone no.
a)		
b)		
c)		

- 8.3. If my child's life or health is at risk, I agree to medical procedures, including hospitalisation, and immediate notification of one of the above mentioned persons.
- 8.4. My child may be collected by the following persons:

Full name	PESEL No.	phone no.
a)		
b)		
c)		

8.5. Information about my child's state of health and everyday situations at the Crèche may be given to the following persons:

Full name	PESEL No.	phone no.
a)		
b)		
c)		

* Remark: the child may be collected only by an adult.

The information offered in this Card shall be used for the organisation and planning of work with your child.

Being aware of the criminal sanction laid down in art. 233 §6 of the Criminal Code, I hereby certify with my personal signature that the information given in the Card is true.

Łódź, dated

readable signature of Mother/ Guardian

readable signature of Father/ Guardian