**SAMPLE EMERGENCY CONTACT DETAILS SHEET**

**EMERGENCY CONTACT DETAILS KID’S CHURCH [6-10yrs]**

| **No.** | **Child’s Name** | **Contact Person** | **Contact Phone Numbers** | **Allergies/ Medical Conditions** | **Photo Consent** |
| --- | --- | --- | --- | --- | --- |
| 1 | **SMITH,** Jane | Mummy SMITHDaddy SMITH |  | No | Yes |
| 2 | **SMITH,** Joe | Mummy SMITHDaddy SMITH |  | Dairy productsNuts | Yes |
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