



Emergency contact update

Please complete relevant sections with new details

Child's first name: <input style="width: 90%;" type="text"/>	Surname/Family name: <input style="width: 90%;" type="text"/>
New Emergency contact (Includes authority to collect the child and permission to provide overnight care)	
Name: <input style="width: 95%;" type="text"/>	Mobile phone: <input style="width: 95%;" type="text"/>
Address: <input style="width: 95%;" type="text"/>	Home phone: <input style="width: 95%;" type="text"/>
Suburb/Town: <input style="width: 80%;" type="text"/> Postcode: <input style="width: 40%;" type="text"/>	Work phone: <input style="width: 95%;" type="text"/>
Relationship: <input style="width: 95%;" type="text"/>	Contact priority: <input style="width: 40%;" type="text"/>
New Authority to collect child only (Authorised to collect the child but not to be contacted in an emergency e.g. child care centre staff)	
Name: <input style="width: 95%;" type="text"/>	Mobile phone: <input style="width: 95%;" type="text"/>
Address: <input style="width: 95%;" type="text"/>	Home phone: <input style="width: 95%;" type="text"/>
Suburb/Town: <input style="width: 80%;" type="text"/> Postcode: <input style="width: 40%;" type="text"/>	Work phone: <input style="width: 95%;" type="text"/>
Relationship: <input style="width: 95%;" type="text"/>	
Remove emergency contacts	
Remove the following individuals from the emergency contact list for my child	
Name: <input style="width: 95%;" type="text"/>	Name: <input style="width: 95%;" type="text"/>
Signature	
Signature of parent / guardian: <input style="width: 95%;" type="text"/>	Date: <input style="width: 40%;" type="text"/>
Site Use Only	
Date new details entered in EYS <input style="width: 40%;" type="text"/>	Initials: <input style="width: 40%;" type="text"/>



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