

The Highland Visual and  
Performing Arts Institute  
21 Crimi Circle  
Highland, New York 12528  
845-691-9313 or 845-706-2575

A project of  
The Arts Community

**EMERGENCY CONTACT FORM**

**From:** Sue Morano, CPR-AED Advanced First Aid

**Date:** July, 20\_\_\_\_

Dear Parent/Guardian:

I would like to welcome you and your child to our camp this summer. Please be aware that I will be available on site at all times to administer emergency medical care to your son or daughter, if the need should arise.

In the event your child requires hospital care, I would like your permission to provide, at my level of training, such care as I can until proper medical services arrive to transport your child to a hospital.

To insure the proper information is available for myself, and if necessary, other medical servers, e.g., ambulance, hospital, it is important that you fill out and return the information listed below. Please include any additional information you feel is important to your child's well being.

We look forward to working with your children and hope they have a wonderful week!

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CHILD'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

HOSPITAL PREFERENCE: \_\_\_\_\_

PERTINENT MEDICAL INFORMATION (Allergies, Conditions, Medications, etc.) \_\_\_\_\_

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PARENT/GUARDIAN SIGNATURE \_\_\_\_\_

CONTACT NUMBERS: Home: \_\_\_\_\_ Work \_\_\_\_\_

Cell: \_\_\_\_\_ Other: \_\_\_\_\_