

Return this completed form to St. Johns UCC, 801 S. Mechanic St, Jackson MI 49203
or scan and email to nhlatsjucc@gmail.com

Students Name:			Birthdate:		
Address:		number and street	city	state	zip code
parent/legal guardian name		home phone	parent/legal guardian name		home phone
home address (if not same as childs)		cell phone	home address (if not same as childs)		cell phone
city	state	zip code	city	state	zip code
email address			email address		
employer name		work phone	employer name		work phone
Name of Child's Physician or Health Clinic			Physician's or Health Clinic's Phone Number		
Hospital Preferred for Emergency Treatment (optional)					
Allergies, Special Needs and Special Instructions (Attach additional sheets, if necessary.)					

Emergency Contact & Release of Child: List all individuals, including parents/legal guardians, in order of preference, to be contacted in an emergency. If possible, include at least one person other than the parents/legal guardians to be contacted in an emergency and to whom the child can be released. The second phone number column can be left blank. (If more individuals, attach additional sheets.)

1-	phone 1	phone 2
2-	phone 1	phone 2
3-	phone 1	phone 2

Release of Child Only: List all individuals, other than the parents/legal guardians, to whom the child may be released. (If more individuals, attach additional sheets.)

1-	phone	2-	phone
3-	phone	4-	phone

Parent/Legal Guardian Initials:

_____ I give permission to Nancy Hackworth Literacy initiative at St. John's United Church of Christ to secure emergency medical treatment for the above named minor child while in care.

I certify that I accurately completed this form and if anything changes, I will notify the provider by updating this form. I also agree with the following:

- 1 - provide transportation to and from coaching sessions for the student. Literacy coaches are not permitted to pick up or drive students home.
- 2 - escort students to the coaching location inside SJUCC. Literacy coaches are not permitted to meet student at the exterior door. Directions to coaching location inside SJUCC will be provided.
- 3 - drop off student on time at the beginning of the coaching session.
- 4 - pick up students at the coaching location inside SJUCC. Literacy coaches are not permitted to escort students to the exterior door. Directions to coaching location inside SJUCC will be provided.
- 5 - pick up student on time at the conclusion of the coaching session. Literacy coaches will advise parent at what time student is to be picked up.
- 6 - provide at least 24 hours' notice if student will miss a coaching session. Coach is to be contacted directly via text or email to be informed of cancellation. Coach contact information will be provided.

A - If Parent/Guardian does not appear on time to pick up student, coach will call the parent first, then call each emergency contact on this information form. If no one can pick up the child and coach has not heard from the parent, we will then call CPS @ 855-444-3911 after 30 minutes has elapsed from the scheduled pick up time.

B - If two (2) sessions are missed without 24 hours' notice, student may lose tutoring time and/or continued participation in the NHL initiative.

C - Photo ID of Parent/Guardians and Emergency Contact must be provided for identification and safety purposes. Confidentiality will be maintained by NHL at SJUCC.

Signature of Parent or Guardian:

Date Signed:

Date Card Reviewed	Parent or Legal Guardian Initials	Date Card Reviewed	Parent or Legal Guardian Initials	Return this completed form to St. Johns UCC, 801 S. Mechanic St, Jackson MI or scan and email to nhlatsjucc@gmail.com