

**Liberty Evangelical Free Church (LEFC)**  
**Nursery Information, Emergency Information and Release Form.**

Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Medical Information: (allergies to food, medication, or other substances etc.)

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Snacks my child may have if provided in the nursery (including but not limited to)

\_\_\_\_\_ crackers \_\_\_\_\_ dry cereal \_\_\_\_\_ cookies \_\_\_\_\_ water \_\_\_\_\_ juice \_\_\_\_\_ soft candy

other suggestions \_\_\_\_\_.

\_\_\_\_\_ I would not like my child to have any snacks while in the nursery.

\_\_\_\_\_ I will provided my child with a snack for the nursery, it will be located \_\_\_\_\_

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\_\_\_\_\_ I give my permission to the LEFC Nursery Staff to change my child's diapers and \ or to assist them in the bathroom.

\_\_\_\_\_ I request that the LEFC Nursery Staff page me if my child needs a diaper change and \ or need to use the bathroom, as I wish to take care of those needs myself.

I by my signature give any and all LEFC representatives permission to treat my child\children for minor injuries and if need be to provide for emergency medical care in the event that I cannot be located immediately. I also agree that I will not hold LEFC Church or its representatives responsible for any accident or injury that may occur in the church building or on its premises.

Doctors Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Other specific requests or information about my child:

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Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_