

EMIRATES KINDER CARE NURSERY



ACKNOWLEDGEMENT

This form is for the parents to provide us with any and all information related to any allergy that their children have. Thus, kindly make sure to fill in the form below and sign it.

Details

Does your child have any allergies?

Yes, _____

No

Does your child take any medications for the allergies?

Yes, _____

No

Do you have a medical report stating the type of allergies your child has?

Yes. Please make sure attach it/send it via WhatsApp

No

Child's Full Name: _____

Parent's Full Name: _____

Parent's Contact Number(s): _____

Date: _____

Signature: _____



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