

Parent Emergency Evacuation Information Form

(To be given to parents at least annually)

Name of program	FLEDGLINGS NATURE BASED PRESCHOOL
Program address	928 WHITE OAKS ROAD LACONIA, N.H. 03246
Emergency contact at program	JUDE HAMEL EXECUTIVE DIRECTOR
Phone numbers of emergency contact	OFFICE: 366-5695 CELL: 603-738-1414
Cell phone of emergency contact (Please do not call cell phone number during non-emergencies; it will not be turned on.)	EXECUTIVE DIRECTOR CONTACT ABOVE
In the event the facility must be evacuated because of a confined emergency, the staff and children will leave the building and gather in the immediate area at	FARMHOUSE BARN
In the event the facility must be evacuated because of an emergency in the immediate area the children and staff will be transported. <u>(location determined by emergency response team)</u>	EXECUTIVE DIRECTOR CONTACT: 603-738-1414
The address, phone number, and contact person at the assembly area is	EXECUTIVE DIRECTOR CELL: 603-738-1414
If necessary, children will be transported to this health care facility	LAKES REGION HOSPITAL
Address, phone number	80 HIGHLAND ST. LACONIA, NH 03246 603-524-3211

I understand that my child(ren) may be relocated to an evacuation site in the case of an unsafe condition in the child care program facility.

Child/Children's Name(s) _____

Parent Signature _____ Date _____

Parent/Guardian Signature for Permission to treat medically _____