

# OHIO GERMAN LANGUAGE SCHOOL

*an affiliate of*

GERMAN AMERICAN NATIONAL CONGRESS - DEUTSCH-AMERIKANISCHER NATIONAL KONGRESS

[www.ohiogermanlanguageschool.org](http://www.ohiogermanlanguageschool.org)

## Emergency Information 2009-2010

Parent or guardian name: \_\_\_\_\_

**IMPORTANT:** Prior to the first day of school, provide this information for all children you have enrolled:

Child's Name	Child's Date of Birth	Medical Condition or Allergy OGLS needs to be aware of?	
		Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

Describe the medical condition or allergy for each "yes" you have indicated:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SATURDAY MORNING CONTACT NUMBERS:** ( ) ( )

Alternative contact person(s) in the event of an emergency involving one of the children listed above:

#1 Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Relationship: \_\_\_\_\_ Cell ( ) \_\_\_\_\_  
#2 Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
Relationship: \_\_\_\_\_ Cell ( ) \_\_\_\_\_

I understand that no one at OGLS is qualified or authorized to provide medical treatment to students. In the event of accident or illness involving any child listed above, I request that OGLS immediately notify me and/or the alternative contact person(s). If OGLS is unable to reach either me or the alternative contact person(s) after reasonable efforts, I give OGLS permission to take whatever good-faith measures it deems necessary and appropriate in the best interests of the child, possibly including but not necessarily limited to making a 911 call. I release OGLS and anyone working or volunteering under its auspices from any and all liability related to any actions or inactions by them in any such situation.

Signature of Parent/Guardian \_\_\_\_\_ DATE: \_\_\_\_\_

*The Ohio German Language School is a non-profit organization.  
Our school does not discriminate by race, religion, age, or national origin.  
To continue to offer low-cost instruction, we solicit and appreciate volunteer work.*