



Fisher Early Learning Center at The University of Denver
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www.du.edu/fisher

Medical Emergency Authorization Policy & Permission

In the event of a medical emergency the following actions will be taken:

- *Contact the child's parent/guardian*
- *Contact the Emergency Contact listed on the child's Emergency card*
- *Make decisions that are in the best interest of child, including ambulance transportation to the nearest medical facility*

By signing below, I acknowledge that I have read the Medical Emergency Authorization policy and hereby give the Fisher Early Learning Center permission to take the above mentioned actions in the event of a medical emergency involving my child.

Child Name - Printed

Classroom - Printed

Parent/Guardian Name - Printed

Parent/Guardian Name - Signature

Date