



# Emergency Information for a Nanny

All the important information a nanny needs to know while in your home

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Parent #1 name: \_\_\_\_\_ Number: \_\_\_\_\_

Parent #2 name: \_\_\_\_\_ Number: \_\_\_\_\_

House address: \_\_\_\_\_

Home #: \_\_\_\_\_

Work #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Child's name: \_\_\_\_\_ Age: \_\_\_\_\_

Child's name: \_\_\_\_\_ Age: \_\_\_\_\_

Child's name: \_\_\_\_\_ Age: \_\_\_\_\_

Children's allergies: \_\_\_\_\_

Health card #: \_\_\_\_\_

Hospital: \_\_\_\_\_ Number: \_\_\_\_\_

Medication info: \_\_\_\_\_

Neighbour name: \_\_\_\_\_ Number: \_\_\_\_\_

Friend name: \_\_\_\_\_ Number: \_\_\_\_\_

Family doctor: \_\_\_\_\_ Number: \_\_\_\_\_

Dentist: \_\_\_\_\_ Number: \_\_\_\_\_

Police number: \_\_\_\_\_

Fire number: \_\_\_\_\_

Poison control: \_\_\_\_\_