

For the Babysitter

Dial 911

When You Need the . . .

POLICE 

FIRE 

AMBULANCE 

Address of residence: _____

City: _____

Closest Cross Street: _____

Telephone number to home: _____

MOM Work: _____ **Cellular:** _____ **Pager/Other:** _____

DAD Work: _____ **Cellular:** _____ **Pager/Other:** _____

Our Address: _____

Our Crossroads: _____

Grandparents (Maternal): _____ **Phone:** _____

Grandparents (Paternal): _____ **Phone:** _____

Our Family Doctor: _____ **Phone:** _____

Neighbors: _____ **Phone:** _____

Close Relative: _____ **Phone:** _____

Children Allergies: _____

Other Important information _____