

Existing Injury Form

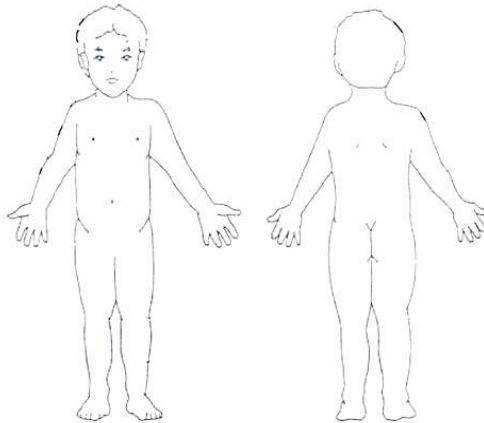
To comply with child protection requirements –

This form is to be completed by Parents or Carers when they bring a child to Nursery with a pre-existing injury. This form will be held in accordance with our confidentiality policy.

Name of child _____

Date of Injury _____ Time of Injury _____

Where and what is the injury _____



How did the Injury happen _____

Any treatment or medical aid sought _____

Signature _____ Date _____

(Parent/Carer)

Signature _____ Date _____

(Nursery)

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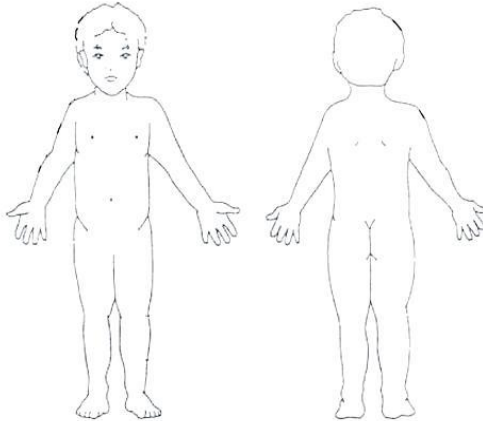
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