

Part I - Medical Authorization Consent

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for: (1) the administration of any treatment deemed necessary by Dr. _____ (preferred physician), or Dr. _____ (preferred dentist) or, in the event the designated preferred practitioner is not available, by another licensed physician or dentist; and (2) the transfer of the child to _____ (preferred hospital) or any hospital reasonably accessible. **This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of surgery.** Facts concerning child's medical history including allergies, medications being taken, and physical impairments to which a physician should be alerted: _____

Signature of parent or guardian _____ Date _____

Part II - Refusal to Consent (Do not complete if you completed Part I)

I do not give my consent to emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to take no action or to _____

Signature of parent or guardian _____ Date _____

You need to know:

- Safety City is FREE!
- Transportation is the parent's responsibility.
- Prompt pick-up and drop off is vital.
- Play clothes should be worn.
- A snack will be provided.
- **This form must be completed and returned by June 3rd.** This registration guarantees that your child is enrolled. Just show up on June 10th.

EMERGENCY

In the event of an **emergency** and you need to contact us during the time your child is in Safety City, you may call 330-492-4089.

QUESTIONS

If you have any **questions** or **concerns**, please contact Inspector Scott Kelly at 330-492-4089.

REGISTRATION

To register, complete the attached form and send to:

Plain Township Fire Administration
Safety City
1742 Schneider Street, N.E.
Canton, OH 44721

**PLEASE REGISTER EARLY!
SPACE MAY BE LIMITED.**

**REGISTRATION DEADLINE:
Monday, June 3rd**

What is Safety City?

Safety City is an educational program designed to introduce your pre-kindergarten child to safety issues. It is designed to educate young children in a non-threatening manner, while offering information that is easy for children to understand and use.

Who will teach the program?

The program is being taught primarily by members of the township safety forces. Your child will be under the supervision of an adult, assisted by a student volunteer.

What is taught in Safety City?

The first day will be a general introduction to the program. This will allow the children to explore the program and become comfortable with their surroundings.

- Day 1: Stranger Danger
Pedestrian Safety
- Day 2: Gun Safety
Bicycle Safety
- Day 3: Burn Safety
Bus/Seat Belt Safety
- Day 4: Fire Safety
Playground Safety
- Day 5: Food Nutrition and Wellness
Poison Safety

Graduation Ceremony

Parents are invited to the Graduation Ceremony on Friday, June 14th, from 11:15-11:45.

AFTER REGISTERING SAVE THIS FORM AS A REMINDER!



for Children Entering
Kindergarten in the Fall of 2019

FREE

offered by
Plain Local Schools
with
Plain Township Fire & Rescue
Stark County Sheriff's Office
Plain Township Division

WARSTLER SCHOOL
2500 SCHNEIDER ST NE

June 10—14, 2019

9:00 a.m. - 11:15 a.m.

*Please arrive 1/2 hour early
the first day*



Non-Profit Org.
U.S. Postage
PAID
Canton, Ohio
Permit No. 2083

Plain Local Schools
901 44th Street, N.W.
Canton, OH 44709

Safety City Registration/Medical Authorization Form

Name _____ Girl _____ Boy _____ School _____ Phone _____
Address _____
(phone) _____ has my permission to participate in the Safety City Program. In case of emergency, I can be reached at _____ Monday through Friday while my child is in Safety City. If I cannot be reached, call (other parent/guardian) _____ at (phone) _____.

Parent Name (Signature) _____ Parent Name (Print) _____
You must complete the Emergency Medical Authorization Form on the back which authorizes emergency treatment for children who become ill or injured while under school authority when parents or guardians cannot be reached.

Send to: Plain Township Fire Administration Office, **Safety City**, 1742 Schneider Street N.E., Canton, OH 44721 by June 3, 2019.
Please check if you could volunteer some time during this week to help with the Safety City Program. You will be contacted by phone.

Classroom assignments are final!