

# Existing Injury Form



This form needs to be completed if your child is attending Nursery with an injury sustained whilst out of our care.

Name of Child \_\_\_\_\_

Brief description of how and where the injury was sustained and the date it occurred	Nature of the injury (please describe)

Signed by Parent/Carer \_\_\_\_\_

Print name \_\_\_\_\_ Date \_\_\_\_\_

Received by staff (name) \_\_\_\_\_

Signed by staff \_\_\_\_\_ Date \_\_\_\_\_