

Declaration of noninfectiousness

(to be handed in on the arrival day)

I hereby declare that the child..... does not suffer from any infectious disease, or has not been in contact with anyone suffering from an infectious disease within the last 2 weeks. I am fully aware of the consequences that would follow if I provided false data.

The medication that the child is taking, doses and times:

Allergies or suspected allergies:

Any special diet:

Phone number where you or your family members can be reached:

Date and signature of a legitimate representative (a parent):.....

Provide a double-faced COPY of your health insurance card here: