



WHAT TO DO

If your child is missing from home, search through

- » closets
- » piles of laundry
- » in and under beds
- » inside large appliances
- » vehicles—including trunks
- » and anywhere else that a child may crawl or hide

Immediately call your local law-enforcement agency and provide them with your up-to-date Child ID Kit.

After you have reported your child missing to law enforcement, call the National Center for Missing & Exploited Children® at **1-800-THE-LOST® (1-800-843-5678)**.

If your computer is equipped with a microphone and speakers, you may talk to one of our Hotline operators via www.missingkids.com online.



NATIONAL CENTER FOR MISSING & EXPLOITED CHILDREN®

Learn more about this child ID kit at www.missingkids.com/childid

NATIONAL CENTER FOR MISSING & EXPLOITED CHILDREN®

The National Center for Missing & Exploited Children
Charles B. Wang International Children's Building
699 Prince Street • Alexandria, VA 22314-3175
www.missingkids.com • 1-800-THE-LOST®

HOW TO USE THIS KIT

When recovering a missing child, the most important tools for law enforcement are an up-to-date, quality photograph and descriptive information. Complete this Child ID Kit by attaching a recent photograph of your child and listing all identifying and medical information. Update the photograph and information every 6 months, and keep the Kit in a secure, accessible location.



Fingerprints are critical to a complete child identification record and should be taken by trained individuals, such as law-enforcement personnel.

Right Thumb	Right Index	Right Middle	Right Ring	Right Pinky
Left Thumb	Left Index	Left Middle	Left Ring	Left Pinky

FINGERPRINTS



Physician's Name: _____

Emergency Contact: _____

Emergency Contact: _____

Office #: _____

Relationship: _____

Relationship: _____

Allergies/Conditions: _____

Cell #: _____

Cell #: _____

Medications: _____

Home #: _____

Home #: _____

Blood Type: _____

Work #: _____

Work #: _____

MEDICAL INFORMATION



Date of Birth: _____

Nickname: _____

First/Middle Name: _____

Last Name: _____

My child wears or has:

Glasses Contacts Braces Birthmarks Piercings Tattoos

Special Needs: _____

Other: _____

DISTINGUISHING CHARACTERISTICS



Remember to use a high-resolution, head-and-shoulders photo of your child, and update it every 6 months.

PLACE PHOTO HERE



PHYSICAL CHARACTERISTICS



Eye Color: _____

Hair Color: _____

Race/Ethnicity: _____

Sex: Female Male

Height	Weight	Date

PERSONAL INFORMATION



Address: _____

City: _____

Zip/Postal Code: _____

State/Province/Region: _____

Country: _____