



## EMERGENCY CARD 2020-2021

**Home Address:**

**Home Phone:**

**Father's Name:**

**Father's Cell:**

**Father's Work:**

**Mother's Name:**

**Mother's Cell:**

**Mother's Work:**

**Family Last Name**

In an emergency, who should we call first?	Mother	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd
	Father	<input type="checkbox"/> 1st	<input type="checkbox"/> 2nd

Parents are:

Married     Divorced  
 Separated     Other

Child(ren) lives with:

Both parents     Father  
 Mother     Other

Emergency contacts, in the event a parent cannot be reached:

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ 2<sup>nd</sup> Phone: \_\_\_\_\_  
 Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ 2<sup>nd</sup> Phone: \_\_\_\_\_

In the event I am not able to pick up my child(ren) from school, they may be released to the following people:

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ 2<sup>nd</sup> Phone: \_\_\_\_\_  
 Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ 2<sup>nd</sup> Phone: \_\_\_\_\_

### Student #1

Grade: \_\_\_\_\_ Sex: \_\_\_\_\_ DOB: \_\_\_\_\_

Date of last Tetanus shot: \_\_\_\_\_ Medical Conditions: \_\_\_\_\_

Wears:  Glasses Medications: \_\_\_\_\_

Contacts Allergies: \_\_\_\_\_

### Student #2

Grade: \_\_\_\_\_ Sex: \_\_\_\_\_ DOB: \_\_\_\_\_

Date of last Tetanus shot: \_\_\_\_\_ Medical Conditions: \_\_\_\_\_



