



## Emergency Contacts

**Please list contacts in the order you would like us to call in an emergency.  
Anyone marked yes for picking up may do so without the parent's permission.**

Family Name: \_\_\_\_\_

Student Names: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Phone # \_\_\_\_\_ Allowed to Pick up Student(s)? Yes No

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Phone # \_\_\_\_\_ Allowed to Pick up Student(s)? Yes No

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Phone # \_\_\_\_\_ Allowed to Pick up Student(s)? Yes No

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Phone # \_\_\_\_\_ Allowed to Pick up Student(s)? Yes No

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Phone # \_\_\_\_\_ Allowed to Pick up Student(s)? Yes No

Name: \_\_\_\_\_ Relationship to Student: \_\_\_\_\_

Phone # \_\_\_\_\_ Allowed to Pick up Student(s)? Yes No

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_