EMERGENCY INFORMATION

IN ORDER FOR THE SCHOOL HAVE THE MOST CURRENT INFORMATION FOR YOUR CHILD,
PLEASE COMPLETE THIS FORM AND RETURN IT ON OR BEFORE THE FIRST DAY OF SCHOOL.

_____ _____ _____
STUDENT'S NAME DATE OF BIRTH HOME TELEPHONE NUMBER

_____
STUDENT'S ADDRESS

TRANSPORTATION TO SCHOOL: BUS (COLOR) _____ CAR _____

FROM SCHOOL: WALKER _____

BUS (COLOR) _____ TO _____ _____(address)

SP/SF AFTERSCHOOL _____

IN CASE OF AN EARLY DISMISSAL DUE TO BAD WEATHER, MY CHILD IS TO GO HOME:

_____ THE SAME WAY AS LISTED ABOVE _____ AN ALTERNATE WAY (PLEASE SPECIFY) _____

_____ _____
FATHER'S NAME MOTHER'S NAME

_____ _____
HOME ADDRESS & HOME PHONE IF DIFFERENT HOME ADDRESS & HOME PHONE IF DIFFERENT

_____ _____
FATHER'S CELL NUMBER MOTHER'S CELL NUMBER

_____ _____
FATHER'S EMPLOYER AND PHONE # MOTHER'S EMPLOYER AND PHONE #

_____ _____
FATHER'S EMAIL ADDRESS **MOTHER'S EMAIL ADDRESS**

IN THE CASE OF ALL EMERGENCIES, ST. PETER/ST. FRANCIS SCHOOL WILL FIRST ATTEMPT TO CONTACT ONE OR BOTH PARENTS. IN THE EVENT THAT ST. PETER/ST. FRANCIS SCHOOL IS UNABLE TO CONTACT EITHER PARENT, PLEASE LIST 2 OTHER RESPONSIBLE PARTIES WHOM ST. PETER/ST. FRANCIS SCHOOL MAY CONTACT.

_____ _____
NAME, RELATIONSHIP AND TELEPHONE NUMBER NAME, RELATIONSHIP AND TELEPHONE NUMBER

IN CASE OF EMERGENCY AND IN THE EVENT THAT ALL OPTIONS AS LISTED ABOVE HAVE BEEN EXHAUSTED, PLEASE INDICATE THE ACTIONS TO BE TAKEN BY ST. PETER/ST. FRANCIS SCHOOL:

_____ CALL DR. _____ @ _____ AND PROCEED AS INSTRUCTED;

_____ TRANSPORT MY CHILD TO THE EMERGENCY ROOM;

_____ HOLD MY CHILD AT ST. PETER/ST. FRANCIS SCHOOL UNTIL I CAN BE REACHED;

_____ PROCEED ACCORDING TO THE BEST JUDGMENT OF THE SCHOOL NURSE OR PRINCIPAL;

_____ OTHER: _____.

THIS INFORMATION WILL REMAIN ON FILE IN THE SCHOOL OFFICE DURING YOUR CHILD'S ENROLLMENT AT ST. PETER/ST. FRANCIS SCHOOL. UPDATES AND CORRECTIONS WILL BE REQUESTED ANNUALLY. AS PARENT OR LEGAL GUARDIAN, YOU WILL BE RESPONSIBLE FOR NOTIFYING THE SCHOOL OFFICE OF ANY CHANGES IN THE INTERIM.

AFTER YOU HAVE COMPLETED THE INFORMATION, PLEASE SIGN AND DATE BELOW.

_____ _____
PARENT/LEGAL GUARDIAN SIGNATURE DATE