



## Emergency Contacts

**INSTRUCTIONS: FIRST COMPLETE THE INFORMATION FOR EACH PARENT. WE WILL ALSO NEED AT LEAST 2 (TWO) ADDITIONAL LOCAL CONTACTS THAT WE MAY NEED TO CONTACT IN THE EVENT WE CAN NOT REACH THE PARENTS. PLEASE NOTE WHICH PARENT YOU WANT CALLED FIRST.**

**Parent:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Relationship \_\_\_\_\_ Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

**Parent:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Relationship \_\_\_\_\_ Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

**Local Contact #1: Can your child/children be picked up by this person?**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Relationship \_\_\_\_\_ Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

**Local Contact #2: Can your child/children be picked up by this person?**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Relationship \_\_\_\_\_ Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

**Local Contact #3: Can your child/children be picked up by this person?**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
Relationship \_\_\_\_\_ Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_