Emergency Information (2025-2026)

Student's Name (s) _____

_____

_____

Home Address: _____

_____

zip code

Where can parents/ or legal guardian be reached if not at home?

Mother: _____

Cell Number: _____

Email: _____

Father: _____

Cell Number: _____

Email: _____

List a friend or relative who will assume temporary care of your child.

1. Name: _____ _____(relation)

Cell Number: _____ Email: _____

2. Name: _____ _____(relation)

Cell Number: _____Email: _____

3. Name: _____ _____(relation)

Cell Number: _____Email: _____