

## Emergency Information

Name of child: \_\_\_\_\_

Name of parent/guardian (1) \_\_\_\_\_ Home phone \_\_\_\_\_

Business/cellular phone numbers \_\_\_\_\_

Name of parent/guardian (2) \_\_\_\_\_ Home phone \_\_\_\_\_

Business/cellular phone numbers \_\_\_\_\_

Name of persons to contact in case of an emergency

Name \_\_\_\_\_ Home phone \_\_\_\_\_

Business/cellular phone numbers \_\_\_\_\_

Relationship to child \_\_\_\_\_

Name \_\_\_\_\_ Home phone \_\_\_\_\_

Business/cellular phone numbers \_\_\_\_\_

Name \_\_\_\_\_ Home phone \_\_\_\_\_

Business/cellular phone numbers \_\_\_\_\_

Relationship to child \_\_\_\_\_

Name \_\_\_\_\_ Home phone \_\_\_\_\_

Business/cellular phone numbers \_\_\_\_\_

**Persons authorized to take the child from the center**

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**Name**

**Home phone**

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**Business/cellular phone numbers**

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**Relationship to child**

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**Name**

**Home phone**

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**Business/cellular phone numbers**

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**Name**

**Home phone**

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**Business/cellular phone numbers**

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**Relationship to child**

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**Name**

**Home phone**

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**Business/cellular phone numbers**

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**Any specific instructions**

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**Signature (s) of parent or guardian:**

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