

EMERGENCY CONTACT INFORMATION SCHOOL YEAR
2022 to 2023

Family Last Name: _____

Student(s) enrolled in the St. Charles Religious Education Program:

1. _____ Grade 2022-2023 _____

2. _____ Grade 2022-2023 _____

3. _____ Grade 2022-2023 _____

4. _____ Grade 2022-2023 _____

In case of an emergency or if your child(ren) is/are sick/injured we will contact the parent(s) or legal guardian first.

Parent 1: Name _____ **Phone #:** _____

Parent 2: Name _____ **Phone #:** _____

Emergency Contact 1: _____

Phone Number: _____

Relationship to child(ren): _____

Emergency Contact 2: _____

Phone Number: _____

Relationship to child(ren): _____

Please list below names of three (3) additional persons who may pick up your child at dismissal should a parent/guardian not be able to be present. **The person listed below MUST be ready to show ID in the event of the need to pick-up your child.**

YOUR CHILD(REN) WILL BE RELEASED ONLY TO PERSONS NAMED BELOW.

Name: _____ Phone Number: _____

Relationship: _____

Name: _____ Phone Number: _____

Relationship: _____

Name: _____ Phone Number: _____

Relationship: _____