

EMERGENCY INFORMATION

Child's Name: _____

In the event that my child is absent from school and I cannot be reached, please call:

Name	Relationship	Phone

In the event that my child must be brought home early and I cannot be reached, please call the following, who can provide for my child in my absence:

Name	Address	Phone	Relationship

Signature of Self
(Age 18 or older)

Parent/Guardian Signature

If your child has a key and is used to being home alone, you may indicate your permission by signing below:

I hereby give permission for my child _____
to be sent home from school, in the event of an early dismissal, even if I am unable to be reached by telephone.

Signature of Self
(Age 18 or older)

Parent/Guardian Signature