

EARTHQUAKE / DISASTER / EMERGENCY IDENTIFICATION AND RELEASE



Child's Name		Enrollment Date	
Medical concerns or allergies			
Parent/Guardian Name			
Home Address		City	ZIP
Parent/Guardian Phone Number		Parent/Guardian Phone Number	
Out-of-State Contact Name & Phone			
Authorized emergency pick-up names and phone numbers:			
1)			
2)			
3)			
Special instructions or message for your child and teacher(s):			

Attach below a current photo of your child for identification purposes.



THIS FORM TO BE LAMINATED AND PLACED WITH EMERGENCY SUPPLIES