



# Emergency Contact and Authorization to Pick-Up Scholar

**SCHOLAR'S FULL NAME:** \_\_\_\_\_ **Teacher:** \_\_\_\_\_

**Scholar's Address:** \_\_\_\_\_ **APT#:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_

**Mother/Guardian's Full Name:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Mother's Daytime Address:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Mother's Email Address(es):** \_\_\_\_\_

**Father/Guardian's Full Name:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Father's Daytime Address:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Father's Email Address(es):** \_\_\_\_\_

**Phone number for auto notification system:** \_\_\_\_\_

**Scholar lives with:** ☐ Mother ☐ Father ☐ Both ☐ Other: \_\_\_\_\_

## **Person to contact in the event of an Emergency if Parent/Guardian cannot be reached**

**Full Name:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_ **Work/Cell:** \_\_\_\_\_

**Full Name:** \_\_\_\_\_ **Home Phone:** \_\_\_\_\_ **Work/Cell:** \_\_\_\_\_

**Persons authorized to pick the scholar up from School. In the event, the child is not picked up by the parent/guardian, these persons will be contacted in the order listed.**

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Contact Numbers:** \_\_\_\_\_

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**Contact Numbers:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Contact Numbers:** \_\_\_\_\_

**It is the parent/guardian's responsibility to notify the school in writing of any changes to the above.**

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_