

STUDENT EMERGENCY CARD CHANGE FORM

Please use this form whenever a telephone number, address, or email changes. It is imperative that we have this up-to-date information at all times so that we can contact you in case of an emergency. Also use this form when you would like names to be added or deleted from your pick up list.

Child's Name: _____ Group: _____

Telephone Number Changes – Please circle location (work or home) and include area code

Contact: _____ work or home Phone #: _____

Contact: _____ work or home Phone #: _____

Address Change – Please circle location (work or home) and include street address, city, state and zip code

Contact: _____ work or home Address: _____

Email Address Change – Please circle location (work or home)

Contact: _____ work or home Email: _____

Contact: _____ work or home Email: _____

Changes in Persons Authorized to Pick Up Child Other than Parents – Please circle change (add or delete)

Add or Delete: _____ Add or delete: _____

Parent's Signature: _____ Date: _____

For Office Use: Desk _____ Office _____ Classroom _____ Central _____