

**EMERGENCY CARD**

Child: \_\_\_\_\_ M / F Birthdate: \_\_\_\_\_

Enrollment Date \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parent \_\_\_\_\_

Driver's License #: \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Alt. Phone # \_\_\_\_\_

Parent \_\_\_\_\_

Driver's License #: \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Alt. Phone # \_\_\_\_\_

**Emergency Contacts/Authorized Pick-up (when parents are not reachable)**

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

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