

Emergency Information Form

2009-2010 School Year

Please complete and return to Hillside by Monday Aug 24, 2009.

Student Name: _____

Unforeseen Early Dismissal

I give permission for: _____ to go home with any of the following
student's name

Hillside students in the event that I cannot be reached during an unforeseen early dismissal:

1.: _____ 2.: _____ 3.: _____

Parent's or Guardian's Signature date

I also give permission for my child to receive a ride from another Hillside parent in case of emergency:

Parent's or Guardian's Signature date

Phone Numbers

Please provide current work and cell phone numbers of all parents, step-parents and/or guardians:

Father's work: _____ cell: _____

Mother's work: _____ cell: _____

Stepfather's work: _____ cell: _____

Stepmother's work: _____ cell: _____

Guardian's name: _____

Guardian's work: _____ cell: _____

Other emergency contact's name/relationship: _____

Contact's work: _____ cell: _____

Other emergency contact's name/relationship: _____

Contact's work: _____ cell: _____

Emergency Transport Volunteer

I have an all weather vehicle and would be willing to help transport students in the event of an emergency.

Parent's or Guardian's Signature date