



Dear Parent:

From time to time, emergencies may arise with regard to your child during school hours. These emergencies may be of two types: One type is minor in nature (such as falling into a puddle of water and requiring a change of clothes) and the other may be a major emergency requiring immediate medical attention.

You should know that whenever an emergency occurs, we attempt to call you at home first, but, as you can appreciate, it sometimes happens that no one is at home.

In order that emergencies may be dealt with in a manner acceptable to all, it is necessary that the office records be accurate and therefore we ask that the following information be provided to the school.

Father's Name: _____ **Mother's Name:** _____

Home Address: _____ **Home Phone:** _____

Home Fax: _____ **Cell #:** _____

Business Phone of father: _____

Business Phone of mother: _____

Family Doctor: _____ **Phone:** _____

In the event of an emergency, I give my permission to have my child taken to a hospital or doctor if neither parent is available at the time of the accident.

The above approval is given subject to the following conditions:

(Your Child(ren)'s Name)

Signature of Parent

Andy Alblas - Principal