

**St. Mary's School**  
**Emergency Contact Information**  
**2020/2021**

**Family Name:** \_\_\_\_\_

Our first attempt for contact, in case of a student illness or injury, will always be one of the parents. If your work or home number changes during the school year, please make sure you give us updated information.

**Please assume that an occasion may arise when you will not be available for us to contact.** List below, in the order you would like us to attempt to contact, names, daytime phone numbers and relationship of people **who have your permission** to pick the child up at school. Any individual, whom you listed below, will be asked to show identification in order to pick your child up at St. Mary's School

**Contact #1:**

Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Phone #1: \_\_\_\_\_ home cell work (circle one)

Phone #2: \_\_\_\_\_ home cell work (circle one)

**Contact #2:**

Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Phone #1: \_\_\_\_\_ home cell work (circle one)

Phone #2: \_\_\_\_\_ home cell work (circle one)

**Contact #3:**

Name: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

Phone #1: \_\_\_\_\_ home cell work (circle one)

Phone #2: \_\_\_\_\_ home cell work (circle one)

\*\*Please use the back of this form if you need to list additional contacts.