

# ST. JAMES SCHOOL EMERGENCY CONTACT FORM

YOU MUST SUBMIT THIS FORM WITH AT LEAST 1 EMERGENCY CONTACT THAT IS NOT A PARENT. PRINT OUT THESE TWO PAGES, WRITE INFORMATION NEATLY USING A DARK PEN & RETURN ON THE FIRST DAY OF SCHOOL.

**FAMILY NAME:** \_\_\_\_\_ (Last name of primary parent/guardian)

STUDENT NAME	GRADE FALL 2016	HOMEROOM NUMBER	HOW DOES STUDENT GO HOME?

	PARENT/GUARDIAN#1 <input type="checkbox"/> Call First (check only one)	PARENT/GUARDIAN #2 <input type="checkbox"/> Call First (check only one)
First Name:		
Last Name:		
Address: Street plus City, State & Zip		
Home Phone:		
Cell Phone:		
Work Phone:		
Email:		
Are you a SJS Alumnus?	<input type="checkbox"/> NO <input type="checkbox"/> YES/Year of Graduation:	<input type="checkbox"/> NO <input type="checkbox"/> YES/Year of Graduation:
Occupation:		
Employer:		
Position:		
Work Hours:		
If self-employed, what type of business are you in?		
<i>We depend on your experience to assist with the success of our school. Please check the box next to any areas listed in which you have experience or expertise:</i>	<input type="checkbox"/> Marketing <input type="checkbox"/> Public Relations <input type="checkbox"/> Recruitment <input type="checkbox"/> Communications <input type="checkbox"/> Finance <input type="checkbox"/> Fundraising <input type="checkbox"/> Graphic Design <input type="checkbox"/> Web Design <input type="checkbox"/> Photography	<input type="checkbox"/> Marketing <input type="checkbox"/> Public Relations <input type="checkbox"/> Recruitment <input type="checkbox"/> Communications <input type="checkbox"/> Finance <input type="checkbox"/> Fundraising <input type="checkbox"/> Graphic Design <input type="checkbox"/> Web Design <input type="checkbox"/> Photography

**CURRENT PARENTAL MARITAL STATUS:**  married  separated  divorced  single/never married  widowed

**ARE THERE ANY CHILD-RELATED CUSTODIAL ISSUES THAT THE SCHOOL SHOULD BE AWARE OF:**  NO  YES  
If "YES", THE SCHOOL WILL REQUIRE SUPPORTING PAPERWORK ON FILE.

**CHILD/CHILDREN PRIMARILY RESIDE WITH:**  Both Parents  Mother  Father  Other: \_\_\_\_\_

FAMILY NAME: \_\_\_\_\_ (same as top of page 1)

**IN THE EVENT OF AN UNSCHEDULED EMERGENCY DISMISSAL** IN THE EVENT OF AN UNSCHEDULED EARLY DISMISSAL: (check one)

- \_\_\_\_\_ 1. My child/children will ride the bus as usual.
- \_\_\_\_\_ 2. I (parent) will pick-up my child/children in the car-line and no other person is permitted to do so.
- \_\_\_\_\_ 3. My child/children will go home with one of the individuals listed on this form.

**EMERGENCY CONTACTS:** *AT LEAST ONE (NON PARENT) CONTACT REQUIRED. Please check consent box to indicate those individuals who are permitted to pick-up your child/children from School or the After School Program.*

#1 EMERGENCY CONTACT NAME	RELATIONSHIP	HOME PHONE	CELL PHONE	PICK-UP CONSENT
ADDRESS (print clearly):				
#2 EMERGENCY CONTACT NAME	RELATIONSHIP	HOME PHONE	CELL PHONE	PICK-UP CONSENT
ADDRESS (print clearly):				
#3 EMERGENCY CONTACT NAME	RELATIONSHIP	HOME PHONE	CELL PHONE	PICK-UP CONSENT
ADDRESS (print clearly):				
#4 EMERGENCY CONTACT NAME	RELATIONSHIP	HOME PHONE	CELL PHONE	PICK-UP CONSENT
ADDRESS (print clearly):				

**CONSENT:** If you leave the boxes below unchecked, we WILL ASSUME CONSENT. Photos posted on the web will be used to showcase school activities. Student names are not associated with photographs on our website or in school publications, unless it is to announce an achievement or a prize.

**DO NOT SHARE MY CONTACT INFORMATION WITH CLASSMATES FOR SOCIAL PURPOSES.** Keep our family contact information confidential for official use only. Note: if checked, your child's name will appear on class rosters, but all other data will be eliminated.

**I/WE DECLINE CONSENT TO USE CHILD/CHILDREN(S) PHOTOS:** If checked, your child's photos will not be included on the school's main website for publicity purposes, i.e. brochures or ads, on a teacher's classroom website or on any related announcements, i.e. if he/she wins an award that is newsworthy.

\_\_\_\_\_  
Signature of Parent/Guardian #1\_\_\_\_\_  
Date\_\_\_\_\_  
Signature of Parent/Guardian #2\_\_\_\_\_  
Date