



EMERGENCY CONTACT

CHILD'S NAME	FIRST MIDDLE (if applicable) LAST	
EMERGENCY CONTACT ①	RELATION:	* REQUIRED
	NAME:	
	PHONE:	
	EMAIL:	
EMERGENCY CONTACT ②	RELATION:	OPTIONAL
	NAME:	
	PHONE:	
	EMAIL:	
EMERGENCY CONTACT ③	RELATION:	OPTIONAL
	NAME:	
	PHONE:	
	EMAIL:	
EMERGENCY CONTACT ④	RELATION:	OPTIONAL
	NAME:	
	PHONE:	
	EMAIL:	
OTHER NOTES		

◆ In case of an emergency, we will contact in the priority listed above (from 1-4).

◆ If there is a change in any of the contact information listed above, please let us know as soon as possible.

※ If there is someone else coming to pickup your child, other than the name(s) listed above, please let us know prior to pickup. Please note that we are unable to have anyone under the age of 18 pickup your child(ren). Thank you for your understanding.

