## ST. MARGARET MARY SCHOOL EMERGENCY INFORMATION SHEET

IT IS VITALLY IMPORTANT THAT THE SCHOOL HAVE ALL INFORMATION BELOW FOR EMERGENCY CONTACTS.

| EMERGENET CONTROLS.                 |                                     |            |
|-------------------------------------|-------------------------------------|------------|
| Student's Name                      | Grade in September                  |            |
| Home Address:                       |                                     |            |
| (Number and Street)                 |                                     | (Apt. #)   |
| (City) Student Cell Phone:          | (State)Student School E-Mail:       | (Zip Code) |
| Mother's Name:                      |                                     |            |
| Home Telephone:                     |                                     |            |
| Work Address:                       | Work Phone:                         |            |
| Cell Phone:                         | Personal E-Mail:                    |            |
| Father's Name:                      |                                     |            |
|                                     | Work Phone:                         |            |
|                                     | Personal E-Mail:                    |            |
| Other Emergency Contact Person (i.e | Baby Sitter, Grandparents, Neighbor | )          |
| Name                                | Relationship                        |            |
| Home Telephone:                     | Cell Phone:                         |            |
| Name                                | Relationship                        |            |
| Home Telephone:                     | Cell Phone:                         |            |
|                                     |                                     |            |