CALIFORNIA ACADEMY OF LEARNING CHARTER SCHOOL

40B Trojan Way, Coal Center, PA 15423
750 Orchard Street, California, PA 15419
#LoveLearning
Website: www.calcharteracademy.org

Emergency Contact & Pick-Up Authorization Form

Student Information

- Student's Full Name: _____
- Grade: _____
- Date of Birth: _____

Parent/Guardian Information

- Parent/Guardian 1 Name: _____
    - Relationship to Student: _____
    - Phone (Cell): _____ Home: _____
    - Email: _____
- Parent/Guardian 2 Name: _____
    - Relationship to Student: _____
    - Phone (Cell): _____ Home: _____
    - Email: _____

Emergency Contacts
(List individuals to contact if parents/guardians cannot be reached.)

1. Name: _____
    - Relationship: _____
    - Phone: _____
2. Name: _____
    - Relationship: _____
    - Phone: _____

Authorized Pick-Up List
(Individuals allowed to pick up your child from school. Photo ID will be required.)

1. Name: _____
    - Relationship: _____
    - Phone: _____
2. Name: _____
    - Relationship: _____
    - Phone: _____

Parent/Guardian Authorization
I give permission for the school to contact the individuals listed above in case of emergency if I cannot be reached. I also authorize the individuals listed on the Pick-Up List to pick up my child from school.

Signature of Parent/Guardian: _____

Date: _____

Printed Name: _____