Highlands School District
1500 Pacific Ave., P.O. Box 288
Natrona Heights, PA 15065
Phone: 724-226-2400   Fax: 724-226-8437
www.goldenrams.com

Emergency Information Form

School ———————————   Grade ————   Homeroom ————

Parent/Guardian: Please return this form to the office as soon as possible with at least two different phone numbers where someone can be reached <u>in case of an emergency</u>.

STUDENT

Student lives with:

First/Last Name ———————————————

Gender:

Street Address (Box No.) ————————————

City / Zip ————————————

Home Phone ———————————   Unlisted?

Home Email Address ————————————

FATHER / GUARDIAN

First/Last Name ————————————————

Address ———————————————————

Phone ——————————   Cell Phone ——————————

Employer ——————————   Work Phone ——————————

MOTHER / GUARDIAN

First/Last Name ————————————————

Address ———————————————————

Phone ——————————   Cell Phone ——————————

Employer ——————————   Work Phone ——————————

If we cannot reach either parent, whom can we call in case of an emergency? (Provide 2 phone numbers.)

1. Name ———————————————

Address ——————————— Phone ———————————

2. Name ———————————————

Address ——————————— Phone ———————————

PLEASE NOTIFY THE SCHOOL OFFICE IF THERE ARE ANY CHANGES THROUGHOUT THE YEAR.

H651-5