



## Emergency Contact Information

Parent/Guardian Name \_\_\_\_\_

Phone number where we can reach you \_\_\_\_\_

**Who will be picking your child up from After School Care (ASC)? For safety purposes, the people listed below will be the only people allowed to pick up your child from ASC. We will ask for identification before pickup.**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_