



For school use only: Date of Admission: ..... Class: ..... Date input to SIMS.....
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**LIST OF EMERGENCY CONTACTS**

Name of Child ..... Date of Birth .....

(Please list any contacts in case of emergency or illness and in order of priority:

**Emergency Contact 1**

Name .....

Home address .....

Home telephone number .....

Mobile/Work telephone number .....

Relationship to child .....

**Emergency Contact 2**

Name .....

Home address .....

Home telephone number .....

Mobile/Work telephone number .....

Relationship to child .....

**Emergency Contact 3**

Name .....

Home address .....

Home telephone number .....

Mobile/Work telephone number .....

Relationship to child .....

**Emergency Contact 4**

Name .....

Home address .....

Home telephone number .....

Mobile/Work telephone number .....

Relationship to child .....

**PLEASE INFORM THE SCHOOL OFFICE IF ANY OF THE ABOVE DETAILS CHANGE**