

# Holy Rosary Catholic School

G-5191 RICHFIELD ROAD  
 FLINT, MICHIGAN 48506-2114  
 (810) 736-4220

www.holyrosaryflint.com

Dear Parents,

Below is the emergency information that we have on file for your student. If this information is incorrect, please cross it out and write in the correct information. **It is essential that we have at least four different phone numbers to call in case of an emergency. After you have checked carefully for accuracy and made any appropriate additions/deletions, please sign the form at the bottom and have your student return it to school.**

THANK YOU!

STUDENT		GRADE	
ADDRESS			
PARENT 1		HOME PHONE#	
WORK#		CELL#	
EMAIL			
PARENT 2		HOME PHONE#	
WORK#		CELL#	
EMAIL			
OTHER CONTACTS (IN CALLING ORDER)	1.		
	2.		
	3.		
PLEASE STATE RELATIONSHIP TO STUDENT	4.		
	5.		
	6.		
	7.		
	8.		
HEALTH CONCERNS			
PRESCRIBED MEDICATIONS			
MEDICAL (DOCTOR, PHONE#)	( ) -		

\_\_\_ All information on this sheet is correct as is, with no additions, deletions, or changes.

\_\_\_ Please note the additions, deletions, or changes made above.

In case of emergency, if the school is unable to contact any of the people listed above, I authorize the school to take my child to a hospital. I agree to pay all expenses incurred in the emergency case.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

