

**2018/2019 ST. ALOYSIUS ACADEMY  
EMERGENCY CONTACTS/EMERGENCY DISMISSAL/MEDICAL INFORMATION**

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Student lives with  Mother  Father  Both  Guardian Name: \_\_\_\_\_

Father's Name: _____	Mother's Name: _____
Street Address: _____	Street Address: _____
City, ST Zip: _____	City ST Zip: _____
Home Phone: _____	Home Phone: _____
Place of Employment: _____	Place of Employment: _____
Street Address: _____	Street Address: _____
City, ST Zip: _____	City ST Zip: _____
Work Phone: _____	Work Phone: _____
Cell Phone: _____	Cell Phone: _____
Email: _____	Email: _____

**EMERGENCY CONTACTS (when parents cannot be reached)**

1 <sup>st</sup> Name: _____	2 <sup>nd</sup> Name: _____
Home Phone: _____	Home Phone: _____
Work Phone: _____	Work Phone: _____
Cell Phone: _____	Cell Phone: _____

**AFTER SCHOOL CARE (other than St. Aloysius Academy)**

Organization Name: _____	Caregiver Name: _____
Phone: _____	Home Phone: _____
	Cell Phone: _____

**EMERGENCY EARLY DISMISSAL (MEANS OF TRANSPORTATION)**

In case of an unscheduled emergency early dismissal, my son will take the following means of transportation:  Car  Bus\*\*\*

My son is permitted to go home with the following parent/guardian if I cannot come.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Please note important information:**

- Extended Day and after-school activities are cancelled.
- **Remember: \*\*\*Buses come at varying times. Each district sets its own pick-up time.**
- Students will be sent home by their usual means of transportation unless otherwise indicated.
- The school phone is usually tied up. Please try to avoid having your son make a call.
- **Share your Plan!** Your son should know what to do when he arrives home and you are not there.  
Where is the key? Whom does he call? Where are the telephone numbers?
  
- **I realize that my child/children will be using textbooks and other resources from State of Pennsylvania Act 195/90/35 funding.**

**OVER** →

