

Date _____

Family Name

**SAINT JUDE CATHOLIC SCHOOL
CODE BULLDOG EMERGENCY FORM
2003-2004**

Family Last Name Home Phone

1. Student Name Grade 2. Student Name Grade

3. Student Name Grade 4. Student Name Grade

5. Student Name Grade 6. Student Name Grade

Mother's Full Name Work Phone Cell Phone

Father's Full Name Work Phone Cell Phone

Please list the name of a person who can pick up your children in the event of a school emergency and/or evacuation.

Name Relationship to Students

Home Phone Work Phone Cell Phone

The above person has my permission to pick up my children in the event of a school emergency without having been contacted by the school.

We further understand that the school reserves the right to change, modify, and/or revise any part of this plan at any time.

Signature