

Student Emergency Contact List

SCHOOL YEAR: _____

Name of Student:	Grade/Teacher:
100 mm	up my child from Ross Elementary: All emergency heir ID to sign out your child.
In case of an emergency, I give the following individ	uals permission to pick up my student(s) from Ross:
Name:	
Relationship to Family:	
Contact #:	
*************	*****
Name:	
Relationship to Family:	
Contact #:	
************	*****
Name:	
Relationship to Family:	
Contact #:	
*************	*****
PERMISSION 1	TO WALK HOME
l, give permission	to my son/daughter, t
walk home or to at di	smissal time, every day. Should you have questions
please contact me at the number listed below.	
2	
Parent/Guardian Name:	Contact #:
Parent/Guardian Signature:	Date: