

LUCK 7-12 EMERGENCY UPDATE FORM – 2015-16



*Please fill this form out COMPLETELY.
Form must be filled out and signed by parent/guardian*

Student Name _____ Home/Primary Phone# _____ Grade _____
(Last) (First) (MI)

Parent/Guardian Cell phone(s) # _____ # _____

Parent/Guardian e-mail address(es) _____,
(All numbers/addresses provided will be used in our **Skylert Notification System** for school closing etc. Please notify us as soon as possible of any changes.)

Physical Address _____ City/Zip _____

Mailing Address _____ City/Zip _____
(If different than above)

In case of illness/emergency, who can we notify if parent can not be reached? Please list 2 contact names and phone #'s.

1. _____ 2. _____

Does student have any unusual medical conditions/ allergies? YES NO If yes, explain condition and treatment:

Hospital Preference: _____ Doctor to be notified _____

If emergency treatment is required, and the parents cannot be reached immediately, may the school authorities use their own judgment in calling the doctor indicated, or if not available, an alternate doctor? YES NO

If no, indicate plan to follow _____

FAMILY DATA

Father _____ Mother _____
Stepfather _____ Stepmother _____
Male Guardian _____ Female Guardian _____

Employer _____ Phone # _____ Employer _____ Phone # _____

Student lives with: Both Parents Father Mother Guardian Foster Care Other _____

Parent/guardian marital status: Married Single Divorced* Separated* **Is there a court order regarding custody or physical placement? YES/NO If yes, a copy of the court order must be on file in the school office. Contact the school regarding any restrictions on who may pick up or have contact with your child.*

If custodial parent cannot be reached for any reason can non-custodial be called? YES NO
Does non-custodial parent desire copies of report cards? YES NO If YES-please provide the following:

Name _____ Address _____ Phone _____

*If non-custodial parent desires to be included in our **Skylert Notification System**, please provide phone # _____

Please list below the names and ages of all other children in your household.

Name	Age	Grade in school
_____	_____	_____
_____	_____	_____

Parent/Guardian Signature _____ Date _____