

## EMERGENCY PREPAREDNESS PLAN

CHILD'S NAME \_\_\_\_\_

PARENT / LEGAL GUARDIAN NAME & EMERGENCY PHONE NUMBER

\_\_\_\_\_

PARENT / LEGAL GUARDIAN NAME & EMERGENCY PHONE NUMBER

\_\_\_\_\_

THESE NUMBERS WILL BE PUT ON THE BACK OF YOUR CHILD'S HOMEROOM CARD WHICH IS KEPT WITH YOUR CHILD THROUGHOUT THE DAY.

PLEASE LIST ANY KNOWN ALLERGIES THAT YOUR CHILD HAS:

\_\_\_\_\_

\_\_\_\_\_

PARENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_ (PLEASE UPDATE WHEN / IF INFORMATION CHANGES)