

ALL GOD'S CHILDREN ENRICHMENT CENTER EMERGENCY CONTACT INFORMATION

_____, _____
(Name of child) (Date of birth)

Mother or Legal Guardian _____
Current Home Telephone # _____
Cell Phone # _____
Work Phone # _____

Father or Legal Guardian _____
Current Telephone # _____
Cell Phone # _____
Work Phone # _____

Grandparents _____
Cell Phone # _____
Work Phone # _____
Current Telephone # _____

Authorized pick up person _____
Current Telephone # _____
Cell Phone # _____
Work Phone # _____

Authorized pick up person _____
Current Telephone # _____
Cell Phone # _____
Work Phone # _____