

**EMERGENCY CARD UPA-Ellen Thompson**

Grade \_\_\_\_\_

DOB \_\_\_\_\_

Student Last Name \_\_\_\_\_

Student First Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

Allergies \_\_\_\_\_  
\_\_\_\_\_

Mother Name \_\_\_\_\_

Mother Cell Phone # \_\_\_\_\_

Medications \_\_\_\_\_  
\_\_\_\_\_

Father Name \_\_\_\_\_

Father Cell Phone # \_\_\_\_\_

**PICK-UP LIST (Please List all individuals outside of mother and father that are ALLOWED to pick up your student(s)).**

Contact #1 Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact #2 Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact #3 Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact #4 Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact #5 Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Contact #6 Name: \_\_\_\_\_

Phone: \_\_\_\_\_

**If any information changes, please notify the front desk.**

**Please check one of the following options:**

**Student Name:** \_\_\_\_\_

**SAFE WALKER:** \_\_\_\_\_

**SAFE RIDER:** \_\_\_\_\_

Please choose the BEST option for your student. Descriptions of the Safe Walker and Safe Rider Pick-Up options are explained in the Welcome Letter provided.

**PLEASE BRING TO ORIENTATION**