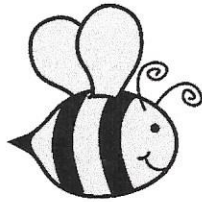


Emergency Contacts & Permission To Drop Off and Pick Up



Child's Name: _____

Name: _____

Address: _____

Relationship: _____

Home #: _____ Cell #: _____ Work #: _____

Name: _____

Address: _____

Relationship: _____

Home #: _____ Cell #: _____ Work #: _____

Name: _____

Address: _____

Relationship: _____

Home #: _____ Cell #: _____ Work #: _____