

## Children's Outreach Ministries – for emergency file

Child's full name: \_\_\_\_\_

Child's home address: \_\_\_\_\_

Child's home phone number: \_\_\_\_\_

Father's name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Father's address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father's occupation and place of employment: \_\_\_\_\_

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

Father's email address: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mother's address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother's occupation and place of employment: \_\_\_\_\_

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

Mother's email address: \_\_\_\_\_

Persons designated to pick up your child:

1. \_\_\_\_\_  
Name Home Phone Work / Cell Phone

2. \_\_\_\_\_  
Name Home Phone Work / Cell Phone

3. \_\_\_\_\_  
Name Home Phone Work / Cell Phone

4. \_\_\_\_\_  
Name Home Phone Work / Cell Phone

In case of an impending disaster in the area, we need at least two 'out of the area' relatives or contacts. Preferably, out of state, if possible. Please include all phone numbers, home, work, cell, etc.

1. \_\_\_\_\_  
Name Home Phone Work / Cell Phone

2. \_\_\_\_\_  
Name Home Phone Work / Cell Phone

3. \_\_\_\_\_  
Name Home Phone Work / Cell Phone