

TRINITY CATHOLIC SCHOOL

Preschool 2022-2023 School Year

Emergency Contact Information & Authorization to Release

Family Name: _____

Home Phone: _____

Address: _____

Mom Cell #: _____

Dad Cell #: _____

Student's Name:

3 Yr. Old _____

4 Yr. Old _____

3 Yr. Old _____

4 Yr. Old _____

Father's Name: _____

Work Phone: _____

Mother's Name: _____

Work Phone: _____

Emergency Contact: (Other than parent)

Name: _____

Relationship: _____

Phone: _____

Name: _____

Relationship: _____

Phone: _____

Authorized for release only to the following individual(s) (other than parent) listed below:

Signature

Date _____