

**CIRCLE OF SEASONS CHARTER SCHOOL  
STUDENT EMERGENCY CONTACT INFORMATION**

Last, First, Middle	
Date of Birth	

The below emergency contact(s) **will be contacted if parents/guardians cannot be reached**. The below contacts also have the parent's permission for student pickup in the absence of his/her parents/guardians.

**All individuals picking up children may be required to show photo identification.**

This is for the safety of your child. Thank you for understanding.

Contact Name	
Phone	
Relationship to Student	

Contact Name	
Phone	
Relationship to Student	

Contact Name	
Phone	
Relationship to Student	

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_