

THIS SHEET IS TO BE KEPT IN THE STUDENT'S BOOKBAG AT ALL TIMES

(parents may choose to place this sheet in a zipper plastic bag for protection)

Immaculate Heart of Mary School

FAMILY EMERGENCY PLAN

This sheet will ONLY be used by the Homeroom Teacher in an emergency situation

Parents should update this sheet as necessary

PLEASE PRINT

DATE _____

STUDENT NAME _____

HOMEROOM _____

Mother Name _____ Daytime Phone/s _____

Father Name _____ Daytime Phone/s _____

Parents may choose to list any medications (and dose) being taken on a regular basis at home or at school, or other important medical information concerning this child. You may indicate if your child has medication in the Health Office. Keep in mind that if there is a lock down this medication may not be available to your child.

Transportation system used at the end of the school day *(check only ONE box – After Care Program would not be an option if there is an emergency):*

Forest Hills West Clermont New Richmond City Milford Batavia Car Rider Walks

Parents: Remember that your child MAY NOT ride any bus other than a bus in your same bus system (see above). The bus system is determined by your home address. In the event of an emergency the adults listed below have your permission to sign out and pick up your child. The phone numbers you provide below are for the convenience of the adult picking up your child – the school will not phone these adults during an emergency.

Dear (your child's name) _____:

- If you are sent home from school early in the event of an emergency and I am not home you are to:

If that plan does not work, you are to _____

- In the event of an emergency the adults listed below have my permission to sign you out from school:

Name

Phone (optional)

Parent Signature _____