

Emergency Closure

In the event of an Emergency Closure, we may not be able to contact you.

Therefore, it is imperative that you make a plan with your child in case they are sent home at an unexpected time of day. The plan below will help direct our staff on behalf of your child. Please complete this plan and return it to your child's teacher. Remember it is very important to be specific with directions for your child's emergency plan. It is the parent/guardian's responsibility to update this information as needed.

Student Name: _____

Please pick only one option of the following plans for your family. If school closed because of an emergency, our family plan is to: **(choose one)**

Opt. #1 _____ Ride the bus home. The plan for him/her is:

Opt#2 _____ Be picked up at school by parent/guardian or by (list two contacts):

Name (print first and last name)

Relationship

Daytime Phone #

Name (print first and last name)

Relationship

Daytime Phone #

Parent/Guardian Contact Information:

Name (print first and last name)

Best Daytime Contact Phone #

Name (print first and last name)

Best Daytime Contact Phone #