

QUINCY CATHOLIC ACADEMY
370 HANCOCK STREET QUINCY, MASSACHUSETTS 02171-2425
PHONE: (617) 328-3830 FAX: (617) 328-6438

STUDENT EMERGENCY INFORMATION SHEET
2017-2018

Quincy Catholic Academy makes every attempt to properly care for your child in the event of illness or accident. In order to assist us, please provide the information requested below and return it to the school office.

(Emergency Information Sheet must be filled out for EVERY student)

Name of Student _____

Grade _____ Homeroom Teacher _____

Address of Student _____
Address City State Zip

Mother/Guardian

Name _____ Address _____ City _____ State _____ Zip _____

Home Phone Number _____ Cell Phone Number _____ Work Phone Number _____ E-mail _____

Father/Guardian

Name _____ Address _____ City _____ State _____ Zip _____

Home Phone Number _____ Cell Phone Number _____ Work Phone Number _____ E-mail _____

ADDITIONAL EMERGENCY CONTACT INFORMATION

We must have the names of at least two additional contacts in the area who may be notified and with whom the student may stay if no one is at home or in the event that we cannot contact the parent/guardian. These people are aware of and agree to this responsibility.

Name _____ Address _____ City _____ State _____ Zip _____

Home Phone Number _____ Cell Phone Number _____ Relationship _____

Name _____ Address _____ City _____ State _____ Zip _____

Home Phone Number _____ Cell Phone Number _____ Relationship _____

Parent/Guardian Signature _____ **Date** _____