

QUINCY CATHOLIC ACADEMY
370 HANCOCK STREET QUINCY, MASSACHUSETTS 02171-2425
PHONE: (617) 328-3830 FAX: (617) 328-6438
STUDENT EMERGENCY INFORMATION SHEET
2019-2020

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 Contact Information must be available for EVERY student!)

STUDENT NAME: _____ GRADE: _____

HOMEROOM TEACHER: _____

ADDRESS OF STUDENT: _____

and Street City Zip Code

MOTHER / GUARDIAN

Name Address (street, city, and zip code)

HOME Phone # WORK Phone # CELL #

EMAIL: _____

FATHER / GUARDIAN

Name Address (street, city, and zip code)

HOME Phone # WORK Phone # CELL #

EMAIL: _____

ADDITIONAL EMERGENCY CONTACT INFORMATION

(OTHER THAN PARENTS/GUARDIANS)

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 or in the event that we cannot contact the parent/guardian. These people are aware of and agree to this responsibility.

EMERGENCY CONTACT #1 (OTHER THAN PARENT)

Name Address City State Zip

Home Phone Number Cell Phone Number Relationship to Student

EMERGENCY CONTACT #2 (OTHER THAN PARENT)

Name Address City State Zip

Home Phone Number Cell Phone Number Relationship to Student

Parent/Guardian Signature _____ Date _____
