

Emergency Contact Information

Schools request that students provide the information of an emergency contact - Someone they can contact in the event the student is involved in something requiring emergency attention. This contact should be a close friend or family member who can assist in these types of situations. Please complete this form ELECTRONICALLY, with this information

NOTE: The information should not be that of yourself or of any agency.

First Name*:

Last Name*:

Relationship*:

Email (Cannot be agency email)*:

Phone Number*:

Address*:

City*:

Province/state*:

Country*:

Postal/zip Code*:

** All fields with the star must be completed. Ensure the information is accurate. If you have provided inaccurate information or your agency's information, this form will be returned to you.*