



**Emergency Contacts**

The following people are authorized to be contacted in an emergency or in the event that a parent/guardian cannot be reached. Please list persons within a 20 mile radius. You must list 2 persons.

Contact #1:				
Name: _____		Relationship to Family: _____		
First	Last			
Home Phone: _____		Cell Phone: _____		
Address: _____				
Street		City	State	Zip Code
Contact #2:				
Name: _____		Relationship to Family: _____		
First	Last			
Home Phone: _____		Cell Phone: _____		
Address: _____				
Street		City	State	Zip Code

**Person's Authorized to Pick-Up**

The following people are authorized to pick up my child \_\_\_\_\_ in an emergency or in the event that a parent/guardian cannot be present. Under no circumstances will your child/children be released to anyone not known to the school without authorization from the parents/guardians.

Name: _____				
First	Last			Relationship to Family: _____
Home Phone: _____		Cell Phone: _____		
Address: _____				
Street		City	State	Zip Code
Name: _____				
First	Last			Relationship to Family: _____
Home Phone: _____		Cell Phone: _____		
Address: _____				
Street		City	State	Zip Code
<b>Special Instructions</b> (Persons Student may NOT be picked up by): _____				
Note: Timberline Learning Center must have a copy of the Legal Custody Order in order to detain pick up from a parent.				

**Health Contacts:**

Physician Name: _____	Phone: _____
Address: _____	
Street	City State Zip Code
Dentist Name: _____	Phone: _____
Address: _____	
Street	City State Zip Code
Hospital of Choice: _____	
Address: _____	
Street	City State Zip Code
Phone: _____	

**Family Structure**

Marital Status: Single _____ Married _____ Separated _____ Divorced _____ Widowed _____
Stepfather: _____ Stepmother: _____
Custody/Visiting Arrangements: _____
_____
Is the child adopted? _____
Age at Adoption: _____ Does the child know? _____

**Siblings/Other Persons Living with the Child**

Please list and fill in details for all other dependants living in the home with the child.

Name	Birth Date/Age	Grade
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

E-Mail: \_\_\_\_\_ [Type text] [Type text]