Fox Hills Elementary
Emergency Release Form
2015-2016

Student's Name_____ Teacher _____

Parent/Guardian Name _____ Phone Number _____

Parent/Guardian Name _____ Phone Number _____

This Emergency Release Form gives teachers the authority to release children to adults listed below **ONLY IN THE CASE OF A CRISIS OR SCHOOL EMERGENCY.** These names and numbers will not be used during a regular classroom day, student illness or injury. Please refer to the Emergency Plan section of your Student and Parent Handbook for more details.

I give permission for my child, listed above, to be released to any of the adults listed below in the event of a crisis or emergency.

_____ _____

Parent's Signature Date

Please list all adults, family members and neighbors who are authorized to pick up your child in the event of a crisis or school emergency. Use the back if necessary.

Name	Phone Number	Relationship