



Student Emergency Contact & Pick-Up Permissions

Student Name 姓名: _____ Date Of Birth 生日: _____

Emergency Contact Name 緊急聯絡人:

1) Last Name 姓: _____ First Name 名: _____

Home Phone 家裡電話: _____ Cell Phone 手機電話: _____

Relationship to applicant 和申請者關係: _____

2) Last Name 姓: _____ First Name 名: _____

Home Phone 家裡電話: _____ Cell Phone 手機電話: _____

Relationship to applicant 和申請者關係: _____

Pick-Up Permissions 接送許可

Child may be picked up by 下列人士可以接我的孩子:

1) Last Name 姓: _____ First Name 名: _____

Home Phone 家裡電話: _____ Cell Phone 手機電話: _____

Relationship to applicant 和申請者關係: _____

2) Last Name 姓: _____ First Name 名: _____

Home Phone 家裡電話: _____ Cell Phone 手機電話: _____

Relationship to applicant 和申請者關係: _____

Child may not be picked up by 下列人士不可以接我的孩子:

1) Last Name 姓: _____ First Name 名: _____

Relationship to applicant 和申請者關係: _____

2) Last Name 姓: _____ First Name 名: _____

Relationship to applicant 和申請者關係: _____

Parent Name (Please Print) 家長姓名 (請書寫) : _____

Parent/Guardian Signature 家長/監護人簽名: _____ Date 日期: _____