Student Last Name		First Name	Gr	ade
Date of Birth				
Address				
Mom's Name				
Dad's Name				
I designate the following people t				
Name	**************************************			
Name				
Name				
Out of State contact		Phone	~	
City	State Relation	ship to Student		
l authorize the release of my child	to any adult he/she feels co	mfortable. Please Circle	Yes	No
Medical alert/condition		_ Medication		
Parent Signature			pply should be at scho	
EMERGEN	CY RELEASE CARD - S	SUSITNA ELEMENTAR'	Y SCHOOL	
EMERGENO Student Last Name	CY RELEASE CARD - S	SUSITNA ELEMENTAR'	Y SCHOOL Grad	de
EMERGENG Student Last Name Date of Birth	CY RELEASE CARD - S	SUSITNA ELEMENTAR` First Name Bus	Y SCHOOL Grad	de
EMERGENG Student Last Name Date of Birth Address	CY RELEASE CARD - S	SUSITNA ELEMENTAR` First Name Bus State	Y SCHOOL Grades pm Zip Code	de
EMERGENG Student Last Name Date of Birth Address Mom's Name	CY RELEASE CARD - S	SUSITNA ELEMENTAR` First Name Bus State Wk#	Y SCHOOLGrad s pm Zip Code Cell#	de
EMERGENG Student Last Name Date of Birth Address Mom's Name Dad's Name	CY RELEASE CARD - S	SUSITNA ELEMENTAR' First Name Bus State Wk#	Y SCHOOLGrad s pm Zip Code Cell# Cell#	de
TeacherEMERGENG Student Last Name Date of Birth Address Mom's Name Dad's Name designate the following people to	CY RELEASE CARD - S Bus am City Hm# Hm# whom my child may be relea	SUSITNA ELEMENTAR' First Name Bus State Wk# Wk# ased in case of an emergence	Y SCHOOLGrad s pm Zip Code Cell# Cell#	de
EMERGENO Student Last Name Date of Birth Address Mom's Name Dad's Name designate the following people to	CY RELEASE CARD - S Bus am City Hm# Hm# Whom my child may be releated. Hm#	First Name Bus State Wk# State Wk#	Y SCHOOLGrad s pmZip Code Cell# Y:Cell#	de
EMERGENG Student Last Name Date of Birth Address Mom's Name Dad's Name designate the following people to Name Jame	CY RELEASE CARD - S	First Name Bus State Wk#	Y SCHOOLGrace s pm Zip Code Cell# Y: Cell# Cell# Cell# Cell# Cell# Cell#	de
EMERGENG Student Last Name Date of Birth Address Mom's Name Dad's Name designate the following people to lame lame	CY RELEASE CARD - S	First Name Bus State Wk#	Y SCHOOLGrace s pmZip Code Cell# Y:Cell# Cell# Cell# Cell# Cell# Cell# Cell#	de
EMERGENG Student Last Name Date of Birth Address Mom's Name Dad's Name designate the following people to lame lame dame dame dame dut of State contact	CY RELEASE CARD - S	First Name Bus State Wk# Whone Phone Phone Phone Phone Phone Wk#	Y SCHOOLGrad s pm Zip Code Cell# Y: Cell# Cell# Cell# Cell# Cell# Cell#	de
EMERGENG Student Last Name Date of Birth Address Mom's Name Dad's Name designate the following people to lame lame ut of State contact ity	CY RELEASE CARD - S Bus am City Hm# Hm# Whom my child may be releated Hm# Hm# Hm# Hm# Relations	First Name Bus State Wk# hip to Student hip to Student White sections are sections as a section of the sec	Y SCHOOLGrad s pmZip Code Cell# Y:Cell# Cell# Cell# Cell# Cell#	de
EMERGENO Student Last Name Date of Birth Address Mom's Name Dad's Name designate the following people to	CY RELEASE CARD - S Bus am City Hm# Hm# whom my child may be releated Hm# Hm# Hm# State Relations to any adult he/she feels come	SUSITNA ELEMENTARY First Name Bus State Wk# Whip to Student fortable. Please Circle Medication	Y SCHOOLGrace s pm Zip Code Cell# Y: Cell# Cell# Cell# Cell# Yes	de