



The Learning Academy of St. Mark's
You Are Guided Today, To Lead Tomorrow.

200 Hempstead Ave, Rockville Centre, NY ~ (516)766-3777 ~ thelearningacademyofsm@gmail.com

Weather/Emergency Contact Sheet

Child's Name: _____ Date of Birth: _____

Teacher: _____

Parent Name: _____ Cell Phone: _____

Place of Work: _____ Work Phone: _____

Parent Name: _____ Cell Phone: _____

Place of Work: _____ Work Phone: _____

The people listed below are the emergency contacts authorized to pick up my child. In the event of an emergency where both parents can **NOT** be reached, the following people have the authority to pick up my child once they have provided photo identification. (Please complete the information)

Name: _____ Phone #1: _____

Address: _____ Phone #2: _____

Name: _____ Phone #1: _____

Address: _____ Phone #2: _____

Name: _____ Phone #1: _____

Address: _____ Phone #2: _____

Parental Consent:

In the event of inclement weather or emergency, I give my permission for The Learning Academy of St. Mark's to release my child to any of the above mentioned people once they have provided photo identification.

(Print Name)

(Signature)