



## Emergency Information Form

2070 Five Mile Line Rd., Penfield, NY 14526

Tel. (585)387-3770 Fax (585)387-3771

[www.finneyschool.org](http://www.finneyschool.org)

### Applicant Information

Date \_\_\_\_\_ Grade \_\_\_\_\_

Applicant's name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Circle One: Girl Boy

### Emergency Contact Information

Contact 1 \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Phone Type: Cell Home Work  
(Circle One)

Contact 2 \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Phone Type: Cell Home Work  
(Circle One)

Contact 3 \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Phone Type: Cell Home Work  
(Circle One)

Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Dentist \_\_\_\_\_ Phone \_\_\_\_\_

Special Medical Considerations:

\_\_\_\_\_  
\_\_\_\_\_

Allergies: \_\_\_\_\_

Medical Alert Text: \_\_\_\_\_

Alert Expires: \_\_\_\_\_