

ONEONTA MONTESSORI SCHOOL EMERGENCY INFORMATION 2022-2023 SCHOOL YEAR



We update our emergency card information yearly. Please complete this form; include all children enrolled at Oneonta Montessori School. Return it to the office as soon as possible.

CHILDREN'S Names (o	ldest first)	BIRTHDAYS	
Home address:	Street	City	Zip Code
Home Phone #:		City	Zip Code
MOTHER'S INFORMAT	TION:		
Name: Home address:			
Home Phone #: Profession:		City Cell Phone #: Business Name:	Zip Code
Business Address:		Basiness Name.	
Pusinoss Tolonhone 4	Street	City	Zip Code
Business Telephone #:		Mother's Email address:	
FATHER'S INFORMATI Name:	<u>ON</u> :		
Home address:	<u> </u>		
Home Phone #:	Street		Zip Code
Profession: Business Address:		Business Name:	
business Address.	Street	City	Zip Code
Business Telephone #:	<u>.</u>	Father's Email address:	
DEDCOME ALITHODIZE		HILD/CHILDREN OR TO CONTACT IN CASE OF EMER	PGENCY (other than parents)
NAME	D TO FICK-OF C	RELATIONSHIP TO CHILD	TELEPHONE #
Children	will be released	I only to persons on this list with proper identificatio	n and authorization.
Plea	ase call the office	e if anyone other than those on this list will be pickir	ng up your child.
ALLERGIES: (PLEASI	E LIST EVERYTHI	ING CHILD IS ALLERGIC TO AND MEDICATION PRES	CRIBED).
IF CHILD HAS A COL	JRT ORDER, PLE	ASE CIRCLE COURT ORDERED PICK-UP DAYS & TIM	ES ASSIGNED TO EACH PARE
Monday: Mom/Dad	Time:	Tuesday: Mom/Dad Time: Wednesday:	: Mom/Dad Time:
Thursday: Mom/Dad	Time:	Friday: Mom/Dad Time:	