

Ridgecrest Adventist Elementary
Emergency Information and Authorized Release Form
Grades K-8, 2018-2019 (One Form per Child)



Ridgecrest Adventist Elementary for Grades K-8
 555 West Las Flores Avenue, Ridgecrest, CA 93555
 www.ridgecrestacs.com

Phone: (760) 375-8673

Student Last Name		First Name		Middle Name		___ Male		Grade	
						___ Female			
Student Address			City		State	Zip	Home Telephone ()		
Other Address							Birth date		
Father's Last Name		First Name		Address		City		State	Zip
Home Telephone ()		Place of Employment/Occupation		Work Telephone ()		Father's Cell ()			
Mother's Last Name		First Name		Address		City		State	Zip
Home Telephone ()		Place of Employment/Occupation		Work Telephone ()		Mother's Cell ()			
Name of other child attending Adventist Christian School:			Grade	Name of other child attending Adventist Christian School:			Grade		
Name of other child attending Adventist Christian School:			Grade	Name of other child attending Adventist Christian School:			Grade		

EMERGENCY INFORMATION

Name of Physician	Physician's Office, Clinic, or Hospital		Physician's Telephone ()	
Insurance Carrier	Policy Number or Insured Social Security		Insurance Telephone ()	
Contact person when parent is not available	Relationship		Telephone ()	
Please indicate any allergies	Please indicate any medications		Please indicate any medical problems	

In the event of sudden illness or accident requiring attention, I hereby authorize Ridgecrest Adventist Elementary to administer first aid, and if necessary, take my child to an emergency care facility, indicated by my signature below.

AUTHORIZED STUDENT RELEASE

In the event of illness, or major disaster that causes structural damage to Ridgecrest Adventist Elementary (such as earthquake, fire, or explosion), students will be released to authorized individuals ONLY. There will be no EXCEPTIONS. Please indicate the names of all adults (18 years or older) other than yourself who are authorized to sign for release of your child.

1. _____ Telephone () _____ Cell () _____
2. _____ Telephone () _____ Cell () _____
3. _____ Telephone () _____ Cell () _____
4. _____ Telephone () _____ Cell () _____

 Parent/Legal Guardian (printed)

 Parent/Legal Guardian Signature

 Date