


# BACKPACK EMERGENCY CARD

It is important to have your emergency contact information with you in case of an emergency. Complete the cards below and keep one in your wallet and one in your child's backpack.


Cut Here

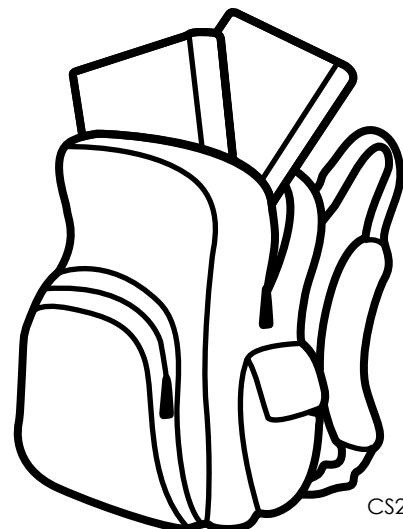
Fold Here

<p><b>BACKPACK EMERGENCY CARD</b></p> <p>Child's Name: _____</p> <p>Date of Birth: _____</p> <p>Home Phone: _____ Cell Phone: _____</p> <p>School Name: _____</p> <p>School Phone Number: _____</p> <p>Special needs, medical conditions, allergies, important information: _____</p> <p>_____</p> <p>_____</p> <p style="text-align: center;"><b>DIAL 911 FOR EMERGENCIES</b></p> 	<p><b>Parent/Guardian/Caregiver</b></p> <p>Name: _____ E-mail: _____</p> <p>Cell Phone: _____ Alternate Phone: _____</p> <p>Text Okay: Yes <input type="checkbox"/> No <input type="checkbox"/> Employer: _____</p> <p>Name: _____ E-mail: _____</p> <p>Cell Phone: _____ Alternate Phone: _____</p> <p>Text Okay: Yes <input type="checkbox"/> No <input type="checkbox"/> Employer: _____</p> <p><b>Out of Town Contact</b></p> <p>Name: _____ E-mail: _____</p> <p>Cell Phone: _____ Alternate Phone: _____</p> <p style="text-align: center;"><b>DIAL 911 FOR EMERGENCIES</b></p>
--	---

Cut Here

Fold Here

<p><b>BACKPACK EMERGENCY CARD</b></p> <p>Child's Name: _____</p> <p>Date of Birth: _____</p> <p>Home Phone: _____ Cell Phone: _____</p> <p>School Name: _____</p> <p>School Phone Number: _____</p> <p>Special needs, medical conditions, allergies, important information: _____</p> <p>_____</p> <p>_____</p> <p style="text-align: center;"><b>DIAL 911 FOR EMERGENCIES</b></p> 	<p><b>Parent/Guardian/Caregiver</b></p> <p>Name: _____ E-mail: _____</p> <p>Cell Phone: _____ Alternate Phone: _____</p> <p>Text Okay: Yes <input type="checkbox"/> No <input type="checkbox"/> Employer: _____</p> <p>Name: _____ E-mail: _____</p> <p>Cell Phone: _____ Alternate Phone: _____</p> <p>Text Okay: Yes <input type="checkbox"/> No <input type="checkbox"/> Employer: _____</p> <p><b>Out of Town Contact</b></p> <p>Name: _____ E-mail: _____</p> <p>Cell Phone: _____ Alternate Phone: _____</p> <p style="text-align: center;"><b>DIAL 911 FOR EMERGENCIES</b></p>
--	---



**U.S. Department of Health and Human Services**  
Centers for Disease Control and Prevention

CS259306-D