

# Pineville United Methodist Youth Emergency Contact Form

Youth's Name: \_\_\_\_\_

Youth's Address: \_\_\_\_\_  
(street)

\_\_\_\_\_  
(city, state, zip code)

Youth's Age \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School \_\_\_\_\_ Grade: \_\_\_\_\_

Parent's Name(s) \_\_\_\_\_

Parent's Phone(s) \_\_\_\_\_ Youth's Phone \_\_\_\_\_

Parent's E-mail \_\_\_\_\_ Youth's E-mail: \_\_\_\_\_

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Medical Concerns: \_\_\_\_\_ Allergies: \_\_\_\_\_

**In Case Of Emergency:**

Do what is deemed necessary!

Wait for further instructions!

Signature of Parent / Guardian \_\_\_\_\_

Emergency Contact #1 \_\_\_\_\_

Phone(s) \_\_\_\_\_

Alternate Emergency Contact \_\_\_\_\_

Phone(s) \_\_\_\_\_



( This form is to be used by clergy, youth ministers and youth leaders; it is used when we take our youth off of the premises of the church for any event. It is very important that the information given on this form stay accurate. We will update as needed.)