

Brookston Community Center Emergency Contact Form

Year 2022

Each child must have a completed form on file.

Child's name:	
Age:	
Date of birth:	

Medical conditions:	
Allergies:	

Family doctor:	
Doctor's phone:	

Parent(s)/guardian(s) name:	
Home Address:	
Home phone:	
Work phone:	
Cell phone:	
Email:	
Alternate contact's name:	
Address:	
Home phone:	
Work phone:	
Cell phone:	

School attending:	
Grade:	
Contact Number:	
Other Information:	

Emergency contact form must be submitted yearly or when information changes. Please send to BCC front desk.