

Celebrating 60 Sensational Years



Emanuel Lutheran School

179 East Main Street, Patchogue, NY 11772
631.758.2250 Fax 631.758.2418 emanluthpatchsc.org

2016 International Award-Winning Inviting School
2017 Inviting School Fidelity Award
by International Alliance for Invitational Education

Faithfully serving families since 1957

Preschool Emergency Contacts & Release Form

****PLEASE FILL OUT AND RETURN ON OR BEFORE THE FIRST DAY OF SCHOOL TO THEIR TEACHER.****

Child's Full Name: _____ Date of Birth: _____

Parent/Guardian Full Name: Mother/Guardian: _____

Father/Guardian: _____

Address: _____

Please fill out the following information where you can be reached by during the day:

MOM: Home No. _____ Work No. _____ Cell No. _____

DAD: Home No. _____ Work No. _____ Cell No. _____

*I give the Preschool teachers permission to **release** my child to the following people.
(They must show photo ID) and in case you cannot be reached, we may **call**:*

1. _____ Phone No. _____

2. _____ Phone No. _____

3. _____ Phone No. _____

You MUST contact the school if anyone else other than a parent will be picking up your child.

Any other concerns your child's teacher needs to be aware of (*custody issues, fears, etc*), please list.

Does your child suffer from: Bee Stings? _____ Allergies? _____ Asthma? _____

Food Allergies? (Please list) _____

If you child requires medication for the above, please list. (You must notify the health office for directions for administration of these medications during the school day). _____



Live a life worthy of the Lord....bearing fruit in every good work, growing in the knowledge of God. Col 1:10

Walking Permission Slip

During the year, the Preschool may take walks around the neighborhood. (To see the change of seasons, visit the Post Office to mail Valentine's Day cards, visit to the Library, etc.). This is the permission slip for your child to be able to go with the class.

My child _____ has my permission to go on walking trips with the class.

Parent/Guardian _____

Photograph/Video Release

_____ Yes, I give Emanuel Lutheran Church and School permission to use my child's photograph and/or appearance in any media, displays, yearbooks, facebook, school's website, advertisements and/or in the news for promotional purposes.

_____ No, I do not give Emanuel Lutheran Church and School permission to use my child's photograph for **promotional** purposes. The teacher's may use it only in the classroom for projects, yearbook or other school-based materials.

Parent/Guardian _____

Phone/Email Chain Release

_____ I give permission for the following phone number and/or email address to be used in communication chains between the classmates.

Phone No: _____ **Email Address:** _____

_____ I do not give permission for my phone number and/or email address be released to classmates.

Parent/Guardian _____