

DISASTER EMERGENCY RELEASE FORM

SAN FRANCISCO UNIFIED SCHOOL DISTRICT Lafayette SCHOOL
 EMERGENCY ADDRESS FORM AND SIGNATURE FORM

FOR
OFFICE
USE

| | | | |
|----------------------|------------|-----------|------------|
| LAST NAME OF STUDENT | FIRST NAME | H.O.# | ROOM NO. |
| 1 ADDRESS | | TELEPHONE | BIRTH DATE |
| ADDRESS | | TELEPHONE | |

2. LEAVING SCHOOL PREMISES: In the event of a major disaster, my child can be released to the following people: Photo I.D. required.

| | |
|------|------|
| NAME | NAME |
| NAME | NAME |
| NAME | NAME |
| NAME | NAME |

DOCTOR'S NAME AND TELEPHONE. If necessary, I wish my child to be taken to the Emergency Hospital Yes No
 I wish any one of the following doctors to be notified:

| | | | |
|--------|-----------|------|-----------|
| 3 NAME | TELEPHONE | NAME | TELEPHONE |
|--------|-----------|------|-----------|

SPECIAL INSTRUCTIONS:

PARENTS BUSINESS ADDRESS & TELEPHONE. The following telephone numbers and addresses may be used in cases of emergency:

| | | | |
|----------------------|------------|------------------|--------------------|
| 4 MOTHER'S LAST NAME | FIRST NAME | BUSINESS ADDRESS | BUSINESS TELEPHONE |
| FATHER'S LAST NAME | FIRST NAME | BUSINESS ADDRESS | BUSINESS TELEPHONE |

I have read the information below and I authorize the above instructions. Relationship to Child: Parent _____ Guardian _____ Date _____
5 SIGNATURE X

13-0699 Rev. 10/83 2500 PKG. PLEASE COMPLETE ALL SECTIONS - DESTROY OLDER FORMS

In the event of an earthquake or other disaster:

1. No student will be dismissed from school unless a parent (or individual designated by a parent) comes for him/her.
2. No student will be allowed to leave with another person, even a relative or babysitter, unless that individual is listed on item 2 of this emergency release form, or we have other written authorization to do so. Items 3-5 duplicates information from the medical emergency release form, however, we ask that you complete this again as this form is kept in a separate emergency student release binder.
3. All designated parties who come for students must be able to identify themselves. Students must be signed out at the office or yard gate. Signs will be posted outside the front entrance if an alternate location for student release is required.
4. We are prepared to care for your child in times of crisis. If you are not able to reach the school, we will care for your child here. We have a number of staff members with first-aid certificates, and we will be in communication with various local emergency services. We ask for your help in the following areas:
 - * Please do not call the school. We must have the lines open for emergency calls.
 - * Following an earthquake or other emergency, do not immediately drive to the school. Streets and access to our school may be cluttered with debris. The school access routes and street entrance areas must remain clear for emergency vehicles.
 - * Do turn on your radio **to KALW** (91.7 FM) and other local stations. Information and directions will be given over the radio.

SCHOOL YEAR 2011 – 2012

Dear Parents/Guardians,

Please donate \$2.00 (cash only) for your child's emergency food for the school year 2011-2012. The money will be used to buy power bars. Please turn in the \$2.00 and the form below as soon as possible for each of your children to the classroom teacher.

Thank you for your cooperation in this matter.

Sincerely,

Lafayette Emergency Response Team (LERT)

Child's Name: _____ Room _____ Grade _____

Allergic to: _____

Учебный Год 2011-2012

Пожалуйста пожертвуйте \$2.00 для вашего ребенка на 2010-2011 учебный год. Деньги будут употреблены на покупку Power Bars что-бы иметь еду на всякий непредвиденный случай. Пожалуйста верните эту анкету как можно скорее и приложите \$2.00 с каждого ребенка. Спасибо. (LERT) Lafayette Emergency Response Team

Имя ребенка _____ Комната _____ Класс _____
Аллергии _____

各位家長及監護人：

學校需要各家長繳交二塊錢為貴子女預備 2011-2012 年度危難時的食物，該筆款項將用作購買 power bars，請將錢及以下表格盡早交回貴子女班主任。

感謝各位的合作。

本校危難應變組謹上

學生姓名：_____ 班號 _____ 年級 _____
引起過敏的物品及食物 _____