



**CHRISTOPHER'S FOOTPRINTS
DISTANT EMERGENCY CONTACT FORM**

I, _____ authorize Christopher's Footprints to contact and release my child/children to the person(s) designated.

Please indicate someone who lives at least five miles away from our childcare center and is not listed on your emergency contact form.

Student's Name (s): _____

Designated Custodian: _____

Phone Number: (H) _____ (C) _____

E-Mail: _____

Relationship: _____

____ I/we do not have an emergency contact out of the state and/or immediate area.

Parent/Guardian Signature

Date