

Student's
Grade Level:

Emergency Contact Form

HENDERSONVILLE ROYALS

I, _____ the parent or Legal Guardian
of _____

herby provide the following contact information to be used in case of
emergency while my child participates in a Hendersonville Royals
sports program (including meeting, training, practices, games, and/or
other related athletic activities) during the current school year.

Parent's Cell #: _____ Home #: _____

Other contact: _____ Phone: _____

Physician: _____ Phone: _____

Insurance Co: _____

Parent's Signature: _____ Date: _____