

# St. Augustine School

## Emergency Contact Information Sheet 2022-2023

This replaces & updates all prior information submitted

**Please return to School Office ASAP!!**

You may print this out, fill in and mail it back to the school, or use the online fillable form, then email/  
mail the form to

Leone Stangle at St Augustine School or [lstangle@staugustineschool.org](mailto:lstangle@staugustineschool.org)

Family Name \_\_\_\_\_ Public School District \_\_\_\_\_

Student Name \_\_\_\_\_ Grade in Sept \_\_\_\_\_

Student Name \_\_\_\_\_ Grade in Sept \_\_\_\_\_

Student Name \_\_\_\_\_ Grade in Sept \_\_\_\_\_

Student Name \_\_\_\_\_ Grade in Sept \_\_\_\_\_

Parent/Guardian Names \_\_\_\_\_

Street Address \_\_\_\_\_

City/Town \_\_\_\_\_ State NY Zip \_\_\_\_\_

Family e-mail Address \_\_\_\_\_

(Also for IRIS alerts) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Home Phone \_\_\_\_\_ This is the **primary** number the IRIS automated phone system will call for delays, school cancellations, reminders and general announcements.

Doctor's Name \_\_\_\_\_ Doctor's Phone Number \_\_\_\_\_

Phone Numbers and Priority Sequence to call for emergency purposes:

1st Phone	Name	Relationship (ie-Mother)	Usual Method of Dismissal  _____ Bus (# _____)  _____ Pick Up  _____ Other/Office _____
2nd Phone	Name	Relationship	
3rd Phone	Name	Relationship	
4th Phone	Name	Relationship	

Office Use Only IRIS \_\_\_\_\_

Cornerstone/TADS \_\_\_\_\_