



EMERGENCY RELEASE FORM

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Student Name: (please print) _____ **Div:** _____

1 – Unexpected early closure

In the event of an early closure due to power outage, snowstorm, or similar occurrence, my child should:

- Upon dismissal, proceed home as usual
- Remain, pending parent instruction
- Other

2 – Student Release due to Earthquake or other Serious Disaster

In the event of an earthquake or other serious disaster, *my child may be released to:*

Parent/guardian name: _____ or _____

OR *into the custody of* the following people: (Please list at least 2 people)

- | | |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

AT TIME OF RELEASE, the person to whom my child is released to must sign on line below:

Name (print): _____ Phone/cell _____

Signature: _____ Date: _____ Time: _____

Destination: _____

I fully realize that as a result of a serious occurrence affecting normal operation of school, my child(ren) will not be released from school to another adult unless authorized by myself; and that on the release of my child(ren), a record shall be kept at the school of the name of his/her temporary guardian, time of release, and expected destination.

Parent/Guardian Signature: _____ Date: _____

Please be sure to inform the people listed above that you have authorized them to pick-up your child(ren) in the event of a serious disaster.

Medic Alert:

- Please check off if your child requires daily medication or has a medical condition. Please be sure that the school is aware of this situation and a 48-hour supply of any essential medication is available in comfort kit. Extra student epi-pen's are kept in the office.*