



**DESMOND T. DOSS CHRISTIAN ACADEMY**  
19 George Street  
Lynchburg, VA 24502  
434-237-1899

**EMERGENCY CONSENT FORM 20\_\_-\_\_**

Family's Last Name: \_\_\_\_\_

Children's Names: 1) \_\_\_\_\_ Birthdate: \_\_\_\_\_  
2) \_\_\_\_\_ Birthdate: \_\_\_\_\_  
3) \_\_\_\_\_ Birthdate: \_\_\_\_\_  
4) \_\_\_\_\_ Birthdate: \_\_\_\_\_

Home Street Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Home Phone: (     ) \_\_\_\_\_ Cell: (     ) \_\_\_\_\_  
Cell: (     ) \_\_\_\_\_

Email Address: \_\_\_\_\_  Yes, I wish to receive information such as letters, absence/tardy info, etc. via email from [schoolsecretary@live.com](mailto:schoolsecretary@live.com)

Mother's Work Phone: (     ) \_\_\_\_\_ Other: \_\_\_\_\_  
Father's Work Phone: (     ) \_\_\_\_\_

Relative/Friend to contact in case of illness/emergency:  
Name: \_\_\_\_\_ Phone (     ) \_\_\_\_\_  
Name: \_\_\_\_\_ Phone (     ) \_\_\_\_\_

Primary Physician's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: (     ) \_\_\_\_\_

Hospital Preference: \_\_\_\_\_

In case of accident or serious illness, if the school is unable to contact me, I hereby authorize the school to take my child to the physician indicated above. If it is impossible to contact the physician, the school may take my child to a hospital authorized by the Board of Health or to the relative or neighbor listed above.

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





This child may be picked up by:

NAME	RELATIONSHIP TO CHILD

Identification question may include:

- ✓ Who are you?
- ✓ What is your relationship to this child?
- ✓ Do you have a photo ID?

\_\_\_\_\_  
Signature of parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Comments: (Please list any issues or special circumstances concerning pickup below)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please save your completed form to your hard drive, then email it to [info@desmondtdoss.org](mailto:info@desmondtdoss.org).

**NOTE:** Be sure you attach the completed PDF form(s) to your email before you hit *Send*.