

# Emergency Contacts Template

## Primary Emergency Contacts

Contact 1:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone (Primary): \_\_\_\_\_

Phone (Alternative): \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Contact 2:

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Phone (Primary): \_\_\_\_\_

Phone (Alternative): \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

Medical Information:

Primary Doctor: \_\_\_\_\_

Phone: \_\_\_\_\_

Allergies: \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Additional Notes:

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