



**GALLATIN GATEWAY SCHOOL  
PO BOX 265, GALLATIN GATEWAY, MT 59730**

**Emergency Release Form**

In the event of a major disaster, parents may not be able to immediately reach the school to pick up children. Therefore, it is important to identify those adults with whom arrangements may be made to take responsibility for a child until parents arrive. These may or may not be the same people identified from online registration, but it is critical that these contacts be neighbors or friends who can arrive at the school within minutes.

Child's Name \_\_\_\_\_ Grade: \_\_\_\_\_

In the case of a major disaster, the school has my permission to release my child to any of the following persons:

<u>Name</u>	<u>Relationship</u>	<u>Phone</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**Parent Name** \_\_\_\_\_ **Phone:** \_\_\_\_\_

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

**Parent Name** \_\_\_\_\_ **Phone:** \_\_\_\_\_

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

**Home Address:** \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\*\*\*\*\*School Use Only\*\*\*\*\*

Date of Release \_\_\_\_\_ ID Source \_\_\_\_\_ Authorized By \_\_\_\_\_

Signature of person to whom child is being released \_\_\_\_\_

Location child(ren) will be taken to \_\_\_\_\_

\*\*\*If your child is seriously injured and a parent cannot be reached immediately, the school will call emergency services.