



**FORM L**

**Emergency Information Out-of-Province/Country Excursion**

Excursion: \_\_\_\_\_

Staff Organizer: \_\_\_\_\_

Emergency Contact Person at School: \_\_\_\_\_ Phone #: \_\_\_\_\_

	Traveler's Name	Emergency Contact	Daytime Telephone	Evening Telephone
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

**Add additional rows for additional participants.**