

# Emergency Contact Information

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

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

## # 1 Person to be contacted in the event of an emergency:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home: \_\_\_\_\_

Work: \_\_\_\_\_

Cell: \_\_\_\_\_

In the event that an emergency situation occurs and we are not able to get in touch with the contact listed above, please designate a secondary emergency contact.

## #2 Person to be contacted in the event of an emergency:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home: \_\_\_\_\_

Work: \_\_\_\_\_

Cell: \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

*If your emergency contact changes it is very important that you notify Human Resources as soon as possible.*