



# Ottawa Adventist School

2191 Benjamin Avenue, Ottawa, Ontario K2A 1P6  
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**Christian Education An Adventist Essential**



## Evacuation Form

School Year

### STUDENT INFORMATION

|              |            |             |                |
|--------------|------------|-------------|----------------|
| Family Name  | Given Name | Middle Name |                |
| Home Address |            |             |                |
| City         | Province   | Postal Code | Home Phone No. |

In case of emergency including school closure.  
(For example, a fire or severe storm warning.)

Instructions given to my child are as follows: (Please check ONE.)

1.  My child may go home by public transit. My child has access to the house if I am not at home.

Additional instructions: \_\_\_\_\_  
\_\_\_\_\_

2.  When informed of the emergency, I will arrange for transportation. I will inform school staff, should a designated adult pick up my child on my behalf.

Additional instructions: \_\_\_\_\_  
\_\_\_\_\_

3.  My child may be released to any responsible adult who offers transportation. Responsible adult may include: another parent, Pastor, Teacher, church Board member.

Additional instructions: \_\_\_\_\_  
\_\_\_\_\_

4.  Teaching staff may be discretionary in any such emergency.

Additional instructions: \_\_\_\_\_  
\_\_\_\_\_

|  |           |                   |
|--|-----------|-------------------|
| Parent's or Guardian's Full Name — Printed | Signature | Date (mm/dd/yyyy) |
|--|-----------|-------------------|