

**Valley Forge Military Academy & College
Commandant's Department**

Emergency Data Sheet

Last Name: _____ Company: _____

First Name: _____ Middle Name: _____

Home Street Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____

FATHER'S NAME: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____ E-mail: _____

MOTHER'S NAME: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____ E-mail: _____

GUARDIAN'S NAME: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____ E-mail: _____

Emergency Data Sheet – Continued

Cadet Last Name: _____

ALTERNATE CONTACTS (LIST IN ORDER OF PRIORITY):

1. **Name:** _____ **Relationship:** _____

Home Phone: _____ **Business Phone:** _____

Cell Phone: _____

2. **Name:** _____ **Relationship:** _____

Home Phone: _____ **Business Phone:** _____

Cell Phone: _____

3. **Name:** _____ **Relationship:** _____

Home Phone: _____ **Business Phone:** _____

Cell Phone: _____