COLLEGE of CENTRAL FLORIDA
–an equal opportunity college–

STUDENT LIFE EMERGENCY CONTACT INFORMATION

To remain with club advisor during travel.

Club/Organization Name: _____ Club Advisor/Instructor: _____

Club Advisor/Instructor Cell Phone: _____ Club Advisor/Instructor Emergency Contact: _____

Traveler				Emergency Contact	
Name	**Known Allergies**	**Student ID No.**	**Cell Phone No.**	**Name/Relation**	**Contact No.**

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