

21st April 2023

Dear Parents/Carers,

We are in the process of updating our safeguarding procedures and we now require three emergency contacts for your child on our system.

Please give details below of all persons who have parental responsibility and these will be listed as 1st and 2nd Emergency contacts.

We also require further emergency contacts – please provide a minimum of three.

Parent / Carer 1 and 1st Emergency Contact

Name :	
Address :	
	Postcode :
Relationship to Child :	Parental responsibility – Yes / No
Home Telephone :	Mobile Number :
Work Telephone :	Workplace Name :
Email :	

Parent / Carer 2 and 2nd Emergency Contact

Name :	
Address :	
	Postcode :
Relationship to Child :	Parental responsibility – Yes / No
Home Telephone :	Mobile Number :
Work Telephone :	Workplace Name :
Email :	

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Greetland
HX4 8LS

01422 372804 - admin@westvaleacademy.org.uk

Principal: Miss L Horsfall
Vice-Principal: Mrs C Akroyd

Part of
Great Heights Academy Trust
Riverside Mills
Saddleworth Road, Elland
HX5 0RY
MAT@greathightstrust.org.uk

MAT CEO:
Mrs A Bennett
Chief Operations Officer:
Mrs J Firth
Chief Finance Officer:
Mrs A Rawson

3rd Emergency Contact

Name :	
Address :	
	Postcode :
Relationship to Child :	Parental responsibility – Yes / No
Home Telephone :	Mobile Number :
Work Telephone :	Workplace Name :
Email :	

4th Emergency Contact

Name :	
Address :	
	Postcode :
Relationship to Child :	Parental responsibility – Yes / No
Home Telephone :	Mobile Number :
Work Telephone :	Workplace Name :
Email :	

5th Emergency Contact

Name :	
Address :	
	Postcode :
Relationship to Child :	Parental responsibility – Yes / No
Home Telephone :	Mobile Number :
Work Telephone :	Workplace Name :
Email :	

If you need to update any of the emergency contact details for your child please contact the school office as soon as possible.

If your child attends Out of School club these contacts will also be used for their emergency contact lists.

It is your responsibility to make sure the Emergency Contact names, numbers and addresses are kept up to date.

Yours Sincerely

Miss Horsfall

Principal

Collection's List

Name of my child: _____

I give permission for the following adults to collect my child from school.

Please state a minimum of three contacts.

Name of Adult (Full name)	Telephone Number	Relationship to Child

I understand that only people on the list will be permitted to collect my child.

I will notify school by **email or in person**, should there be someone not on this list collecting my child for an emergency reason.

On collection the person collecting for emergency reason's not on the above list will provide a password to the class teacher.

Chosen password to be detailed here: _____

If your child attends out of school club the above list will also be used for their collection list.

Parent/Carer Name _____

Signed _____

Date _____