NEUMANN UNIVERSITY
CATHOLIC EDUCATION IN THE FRANCISCAN TRADITION

Emergency Contact Form

Please print clearly. Thanks!

Last: _____ First: _____

Date of Birth: _____ Campus Resident ____ Commuter ____

My permanent home address: _____
(address)

_____
(city) (state) (zip)

My permanent home phone number: _____

My cell phone number : _____

My work number (if employed): _____

My preferred email address: _____

If not living at permanent home address, my local address:

_____
(address)

_____
(city) (state) (zip)

Emergency contact (Parent/Relative/Spouse): _____
(name)

Their address: _____

Their phone: (home) _____
(work) _____
(cell) _____

Emergency contact alternative (non-family member): _____
(name)

Their address: _____
(city) (state) (zip)

Their phone: (home) _____
(work) _____
(cell) _____

By completing this form, I give permission to Neumann University officials to use this emergency contact information in the capacity of their responsibilities with the University. Completed forms should be directed to:

Office of Residence Life
LLC 1 Building
Neumann University
One Neumann Drive
Aston, PA 19014-1298