

## Sample Employee Emergency Notification Form

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In the event of an emergency, I the undersigned employee, authorize The Gymnastics Center to notify the following person:

Name: \_\_\_\_\_

Relationship to Employee: \_\_\_\_\_

Phone Number \_\_\_\_\_

Address: \_\_\_\_\_

In the event you are unable to notify such person, the Gymnastics Center is authorized to notify:

Name: \_\_\_\_\_

Relationship to Employee: \_\_\_\_\_

Phone Number \_\_\_\_\_

Address: \_\_\_\_\_

I understand and agree that the Gymnastics Center will have no obligation or liability to notify such persons.

Date: \_\_\_\_\_

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Printed Employee Name