

**GENERAL INFORMATION AND
EMERGENCY CONTACT FORM**

Employee Information (will be used to update City records):

Name: _____ Date: _____

Home Address: _____

Home Phone: _____ Mobile Phone: _____

Home Email Address: _____

Primary Emergency Contact:

Name: _____ Relationship to You: _____

Address (if different than yours): _____

Home Phone: _____ Mobile phone: _____

Contact's Place of Work: _____

Work Phone: _____

Other Contact Information such as email address: _____

Alternate Emergency Contact (will be used in the event your primary contact cannot be reached)

Name: _____

Relationship to You: _____

Primary Phone: _____ Mobile Phone: _____

Contact's Place of Work: _____

Work Phone: _____

Other Contact Information such as email address: _____

Employee Signature

Date

Provide any additional information on the reverse side of the form. **Emergency contacts should not be minor children. The Bowling Green Fire Division will be called if you are seriously injured and/or ill, and require transport to Wood County Hospital.**

Revised: February 2013