



Making a difference...together

Human Resources & Organizational Development
625 Fisgard Street | T: 250.360.3069 | F: 250.360.3076

Emergency Contact Information Form

This information is extremely important in the event of an accident or medical emergency.

Employee Name: _____

Primary Emergency Contact Information

Name: _____

Phone: _____

I (please insert your name here) _____,
authorize the use of this information in case of emergency:

Employee Signature

Date:

Please return the completed form to
Human Resources and Organizational Development
in person, via email or by Fax 250.360.3076

This information is confidential and is covered by the provisions of the Freedom of Information and Protection of Privacy Act. Personal information contained on this form is collected under the authority of the Local Government Act and is subject to the Freedom of Information and Protection of Privacy Act. The personal information will be used for purposes of Emergency Contact program. Enquiries about the collection or use of information in this form can be directed to a Human Resources and Organizational Development staff member.