

Emergency Contact Information

Event Name: [Event Name]

Date: [Event Date]

Location: [Event Location]

Primary Emergency Contacts

- **Name:** [Contact Name 1]
- **Relationship:** [Relationship]
- **Phone:** [Phone Number]

- **Name:** [Contact Name 2]
- **Relationship:** [Relationship]
- **Phone:** [Phone Number]

Backup Emergency Contacts

- **Name:** [Backup Contact Name 1]
- **Relationship:** [Relationship]
- **Phone:** [Phone Number]

- **Name:** [Backup Contact Name 2]
- **Relationship:** [Relationship]
- **Phone:** [Phone Number]

Additional Notes

Please ensure that all emergency contacts are aware of this event and can be reached at the times listed above.