

Emergency Contact List

Date: _____

To Whom It May Concern,

In case of an emergency, please refer to the following contact list:

Primary Contacts

- **Name:** John Doe
- **Relationship:** Spouse
- **Phone:** (123) 456-7890

- **Name:** Jane Smith
- **Relationship:** Parent
- **Phone:** (098) 765-4321

Secondary Contacts

- **Name:** Mike Johnson
- **Relationship:** Sibling
- **Phone:** (555) 123-4567

- **Name:** Sarah Wilson
- **Relationship:** Close Friend
- **Phone:** (555) 987-6543

Additional Information

Any additional instructions or relevant medical information can be noted here.

Sincerely,

[Your Name]

[Your Address]

[Your Contact Number]