



# *City of Greenfield*

599 El Camino Real Greenfield CA 93927 831-674-5591  
[www.ci.greenfield.ca.us](http://www.ci.greenfield.ca.us)

## CITY OF GREENFIELD EMERGENCY CONTACT INFORMATION

The purpose of this form is to provide individuals whom the City can notify in case of an emergency or accident while you are here at the Greenfield Civic Center. Please provide as much of the following information as possible.

### Information

Name \_\_\_\_\_  
Last First Middle Initial

Department \_\_\_\_\_

### Emergency Contact Information

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_  
Street City

Daytime Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

### Alternate Contact Information

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_  
Street City

Daytime Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

*I understand and agree that the City of Greenfield will have no obligation to notify such persons but will use this information in good faith in the event of an emergency. I agree to release the City of Greenfield and its employees or agents from any liability or damages as a result of a notification or attempt to notify or a failure to attempt notification.*

Please complete a new form anytime your emergency contact information changes and return to Nina Aguayo.

Distribution: Original – File

Copy – Supervisor

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