

OFF-SITE ACTIVITY AND STUDENT TRAVEL: EMERGENCY CONTACT INFORMATION FORM

The personal information collected on this form is collected under the authority of the University Act and is subject to the Freedom of Information and Protection of Privacy Act. The personal information collected will only be used in the event of an emergency taking place during the activity or event for which it has been gathered. For more information regarding the collection and use of personal information please contact Royal Roads University's Privacy Officer at 250 391-2600 (ext 4178) or via email at: info@royalroads.ca, or in writing to: Risk Management, 2005 Sooke Road, Victoria, BC, V9B 5Y2.

PERSONAL INFORMATION

Surname (Family Name)	First Name	Middle Initial
Student Number	Phone	Email

EMERGENCY CONTACT #1

Surname (Family Name)	First Name	Relationship to you
Address		
City/Town	Province/Territory	Country
Postal Code	Email Address	
Cell Phone (Area Code)	Home Phone (Area Code)	Work Phone (Area Code & Ext #)

EMERGENCY CONTACT #2

Surname (Family Name)	First Name	Relationship to you
Address		
City/Town	Province/Territory	Country
Postal Code	Email Address	
Cell Phone (Area Code)	Home Phone (Area Code)	Work Phone (Area Code & Ext #)

PASSPORT INFORMATION (COLLECTED ONLY IN THE EVENT OF INTERNATIONAL TRAVEL)

You may also be required to upload a copy of your passport details page to the event/activity Moodle site.

Name as Inscribed on Passport		Passport Number
Place of Issue	Date of Issue (mm/dd/yyyy)	Date of Expiry (mm/dd/yyyy)

Name (Please print)	Signature (please sign don't type)	Date (mm/dd/yyyy)

I have read and give permission to Royal Roads University to provide this information to the appropriate individuals as needed in the event of an emergency.