



## Emergency Contact Information

Cadet Candidate's Name:

\_\_\_\_\_

### PRIMARY CONTACT:

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

Street

Home Address: \_\_\_\_\_

City

State

Zip Code

Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

Other Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

### SECONDARY CONTACT:

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

Home Address: \_\_\_\_\_

Street

City

State

Zip Code

Home Phone Number: \_\_\_\_\_ Work Phone Number: \_\_\_\_\_

Other Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

\_\_\_\_\_  
Cadet Candidate's Signature

**Return in White Envelope NLT 01Jun2021**

Refer questions to: Chief Verhagen at (860) 701-6511 or Ashley.N.Verhagen@uscga.edu