



Emergency Contact Information Update

Employee #: _____ Employee Name: _____

Effective Date of Change/Update: _____

In the event of an emergency, Tooele City management will use their best judgment pertaining to your care and the circumstances of the emergency. In many cases, management may first attempt to contact your known spouse, family member, or next of kin - even if he/she is not so designated below. The information you provide here is to supplement our emergency preparedness efforts and will be maintained in the human resource office. It will be made available to management upon request. Tooele City reserves the right to deviate from this designation. Minor aged contacts are discouraged.

Primary Contact:

Name: _____ Relationship: _____

Phone Number: _____

Alternate Phone Number: _____

Address: _____

Secondary Contact:

Name: _____ Relationship: _____

Phone Number: _____

Alternate Phone Number: _____

Address: _____

Other Contacts or Information:

Employee Signature: _____