



ADVANCED INDUSTRIAL SERVICES, INC.
AIS GRAPHIC SERVICES, INC.
 3250 SUSQUEHANNA TRAIL • YORK, PA 17406
 800-544-5080 • 717-764-9811
 AIS-YORK.COM



EMPLOYEE EMERGENCY NOTIFICATION FORM

Employee Name: _____

Address: _____

Phone Number: _____
 (Please indicate if Home or Cell)

Email Address: _____

In the event of an emergency, I, the undersigned employee, authorize AIS to notify the following person:

Contact Name: _____

Address: _____

Phone Number: _____
 (Please indicate if Home, Work or Cell)

Relationship to Employee: _____

In the event AIS is unable to notify the above person, AIS is also authorized to notify:

Contact Name: _____

Address: _____

Phone Number: _____
 (Please indicate if Home, Work or Cell)

Relationship to Employee: _____

I understand that all attempts will be made to contact my authorized emergency contacts and agree that AIS will have no liability if unable to reach either contact in the event of an emergency.

Employee Signature: _____ **Date:** _____

Printed Employee Name: _____