



# *Pellegrinaggio Agostiniano in Italia*

VILLANOVA UNIVERSITY

## EMERGENCY CONTACTS

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Telephone: Home (\_\_\_\_) \_\_\_\_\_

Work (\_\_\_\_) \_\_\_\_\_

Mobile (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Telephone: Home (\_\_\_\_) \_\_\_\_\_

Work (\_\_\_\_) \_\_\_\_\_

Mobile (\_\_\_\_) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Provide any particular information or instructions that would be helpful in the event of an emergency: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Villanova University will keep this information confidential,  
but reserves the right to contact the persons named above at its own discretion,  
while participants are on the pilgrimage.**