



September 2017

DISMISSAL POLICY AND FORM

Please fill out the form below and return it to the office by the second class session. Your child will not be dismissed to anyone without proper authorization. If you have made arrangements for someone other than the people listed below to pick up your child, a note is required before class that day.

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Student Name: _____ (*Please print*)

The following people are authorized to pick up my child at dismissal time:

Mother: _____

Father: _____

Other authorized persons and their relationship to the child:

Name: _____ (*Please print*)

Relationship to Child: _____

Name: _____ (*Please print*)

Relationship to Child: _____

Name: _____ (*Please print*)

Relationship to Child: _____

Parent Signature: _____

Parent Name: _____ (*Please print*)

Date: _____