

**IMPORTANT!!**

Please return this form with your child  
the **FIRST DAY** of school.

**Calf Pen Meadow 2019-2020  
Dismissal Information Form**

Student's Name \_\_\_\_\_ Grade \_\_\_\_ Room # \_\_\_\_\_

Teacher's Name: \_\_\_\_\_

\*Please check the appropriate boxes below.

My child's dismissal will be:

	Monday	Tuesday	Wednesday	Thursday	Friday
<b>The School Bus</b> Bus # _____					
<b>Parent Pick-Up</b>					
<b>Walker</b> (4 <sup>th</sup> and 5 <sup>th</sup> Grade Only)					
<b>YMCA</b>					
<b>Boys &amp; Girls Club</b>					

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- If there is a change in your child's dismissal, please send in a note to the classroom teacher. Unless there is a note, your child will be dismissed according to the above schedule. If an emergency should occur during the day, please call the office at (203) 783-3521.
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**Please complete both sides.**



Child's Full Name:

My son/daughter will be picked-up primarily by:

A. \_\_\_\_\_ relationship \_\_\_\_\_

Home # \_\_\_\_\_ (Cell #) \_\_\_\_\_

B. \_\_\_\_\_ relationship \_\_\_\_\_

Home # \_\_\_\_\_ (Cell #) \_\_\_\_\_

In the event that the primary persons are unable to pick-up my son/daughter at the end of the day, he/she may be released to the following persons:

1. \_\_\_\_\_ relationship \_\_\_\_\_

Home # \_\_\_\_\_ (Cell #) \_\_\_\_\_

2. \_\_\_\_\_ relationship \_\_\_\_\_

Home # \_\_\_\_\_ (Cell #) \_\_\_\_\_

3. \_\_\_\_\_ relationship \_\_\_\_\_

Home # \_\_\_\_\_ (Cell #) \_\_\_\_\_

I understand that my child will not be released to anyone other than these five people unless I have made arrangements in writing in advance.

Signed,

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_