

# FRIENDS SCHOOL of BALTIMORE

## PARENT RELEASE FORM

PARENT: Please give this card to your child's present teacher.

Please complete a COMMON REFERRAL FORM on my child.

\_\_\_\_\_ and mail it directly to FRIENDS SCHOOL  
(child's name)

The form should be filled out sometime **AFTER** December 1 and **BEFORE** February 1.

\_\_\_\_\_ parent signature

\_\_\_\_\_ date

Friends School – Admission Office  
5114 North Charles Street  
Baltimore, Maryland 21210  
(410) 649-3211