



AVON COMMUNITY
SCHOOL
CORPORATION

Note for Pick-Up of Student

Child's Name: _____ Date: _____

Teacher's Name: _____

My child will be picked up from school on the following date(s): _____

and time(s): _____ (if before the dismissal time of student)

by: _____

(provide the full name and relationship to student).

[Parent's Signature]



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