

EXCEPTION TO DEPARTURE PROCEDURES FORM

This form is for special exceptions to the procedures authorized on the student's enrollment card.

(Name of child)_____ has permission to leave the St.

John Paul II Catholic School BASP Program on (date)_____.

(Name of person picking up child)_____ will be

responsible for my child after he/she leaves the BASP Program. I understand that the staff will request a photo identification from this person before my child is released to his/her care.

Date

Signature of Parent/Guardian