



2025/2026 Dismissal Form

Student Name _____

Grade Level _____

My child will be dismissed to;

aftercare

On the following days _____

a parent/guardian

Parent/Guardian Name _____

Cell Phone Number(s) _____

through a specialized plan

Please indicate the appropriate information _____

The following people have permission to pick up my child in an emergency.

Name/Cell Number and Relationship

Name/Cell Number and Relationship