

**CHILD DISMISSAL FORM**

Child's Name \_\_\_\_\_ Class \_\_\_\_\_

Parent Name (s)

\_\_\_\_\_ Relationship \_\_\_\_\_

\_\_\_\_\_ Relationship \_\_\_\_\_

Is there a custody situation? YES \_\_\_\_\_ NO \_\_\_\_\_

Please list any names of people who DO NOT have permission to pick up your child:

\_\_\_\_\_

This form will be kept with your child's teacher and will be referred to during dismissal. **It is very important that the information on this form be kept current.** Your child will ONLY be dismissed to the people listed below. You may add or delete names from the list any time during the year, as long as the change is put in writing. A Photo ID will be requested from those picking up your child. Staff will check IDs.

Person who will usually pick up my child:

\_\_\_\_\_ Phone # \_\_\_\_\_ Relationship \_\_\_\_\_

Those listed below have permission to pick up my child:

NAME	PHONE #	Relationship

Teachers will also use this form to contact you if your child needs to be picked up early (due to illness/emergency) or if no one has arrived to pick up your child at the end of the class session. Please list names below in the order in which you would like teachers to contact them should your child need to be picked up for any reason.

NAME	PHONE #	Relationship

Date Completed \_\_\_\_\_ Parent Signature \_\_\_\_\_