

Early Dismissal Form: 2016-2017

This form needs to be filled out for children in Pre-K-8 ONLY.

In the event of an early school closing all lower school parents will be called to verify their child's transportation. A child will not be dismissed without verbal or written parental permission.

Family Name(s) _____

Address _____

Child's Name: _____ Grade: _____

Child's Name: _____ Grade: _____

Child's Name: _____ Grade: _____

Child's Name: _____ Grade: _____

Telephone numbers where you or other designated person may be reached:

FIRST CALL - Name: _____ Relation to child _____

Number: _____

SECOND CALL - Name: _____ Relation to child _____

Number: _____

THIRD CALL - Name: _____ Relation to child _____

Number: _____

How does your child (children) travel home from school each day? Please specify if not the same every day. _____

If your child (children) takes a bus, which one?

Chatham _____

Taconic Hills _____

Hudson _____

Michael Johnston bus _____

Ichabod Crane _____

Camphill transport _____ Triform Transport _____

In the event that we cannot reach you or others listed above directly by phone (answering machine contact is inadequate), **please list the names of school families with whom your child may travel home.**

(If any of these families use a bus, it must be the same one your child regularly rides.)

1) _____ Phone _____

2) _____ Phone _____

3) _____ Phone _____

Check one: In the event of an early dismissal

_____ a call is required

_____ no call is required (for grade 7 and 8 students only)

Parent/caregiver's Signature _____ Date: _____