## NO PM BUS EVERY DAY Pick Up

## Bedford Elementary Yearly Permission Form

Student's Name: _			
Grade Level:	Teacher's Name:		_
Father's Name:			<u>-</u>
Mother's Name: _			
Address:			-
<b>Phone Number(s):</b>	Home:		_
	Work:		-
	Cell Phone:		_
*Alternate Name(s)	of Person(s) permitted to p	pick-up my child without a note by pa	rent:
My child will repor through-out the cur	<u> </u>	to be <u>picked up MONDAY-FRIDAY</u>	_
	e picked up by anyone other nd a note daily to school ref	r than those listed above, it is my lecting this change.	
I accept full respont the end of each scho		l up everyday and for signing my chil	d out a
and administration		ote. Should issues arise, the school dis the "Everyday Parent Pick Up Permi daily note for pick-up.	
Parent/Guardian's Signature		Today's Date	_
			_

**Today's Date** 

Parent/Guardian's Signature