Canisteo-Greenwood Elementary School

Dismissal Form 2019 – 2020

# CHILD(REN)’S NAME(S): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*If there will be more than one type of dismissal for certain days of the week please note (e.g. bus Mon and Wed, pick up Tues, Thurs & Fri).

Please check the appropriate plan(s):

**󠄁 RIDE THE BUS.  *\_\_\_* Home**  *\_\_\_* **Other location** – provide name and address

󠄁

**󠄁 WALK *WITHOUT* AN ADULT.**

**󠄁YMCA PROGRAM. (Must be Registered)**

# **󠄁PICK UP: (Parent, Guardian or Trusted Adult)**

*Fill out following for pick up only:*

I Authorize the following person(s) to receive my child(ren) at PICK UP:

|  |  |  |
| --- | --- | --- |
| Name | Relationship: | Phone Number: |
|  |  |  |
|  |  |  |
|  |  |  |

My child(ren) will follow this dismissal plan during the 2019-2020 school year unless I submit a change in writing no later than 12:00 PM that day. You may also email jpowers@cgcsd.org.

Parent/Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_