

DISMISSAL FORM

MC CORDSVILLE ELEMENTARY SCHOOL

Dear Parent or Guardian,

Please complete this form if you are planning on picking up your child from school on a regular basis. (example: piano lessons every Monday PM) Complete one form for each child. Update this form whenever there is a change in your child's dismissal plans. Please use the FRONT DOORS (East/off Mt. Comfort Road). If there is no dismissal form on file in the office, you must come to the office and sign out your child each time you pick him or her up at school. Thank you! (This is not for AM Kdg use.)

Child's Name _____

Grade _____ Teacher _____

Child will be picked up on the following days:

I authorize the following people to pick up my child:

Signature of Parent/Guardian _____ Date _____