

# EMERGENCY EARLY DISMISSAL FOR MY CHILD

**IN THE EVENT OF WEATHER-RELATED EMERGENCIES THE SCHOOL MAY NOT BE ABLE TO CONTACT YOU. PLEASE USE THIS FORM TO INDICATE ALTERNATIVE ARRANGEMENTS FOR YOUR CHILD.**

**This form will be kept in the office for the current school year only. Please discuss these arrangements with your child(ren), make a copy for your records, and update with the school office as needed. Thank you.**

Student's Name \_\_\_\_\_

Grade \_\_\_\_\_ Teacher \_\_\_\_\_

Address \_\_\_\_\_

Home Phone Number \_\_\_\_\_

Parent's Work and/or Cell Phone:

Dad w \_\_\_\_\_ c \_\_\_\_\_

Mom w \_\_\_\_\_ c \_\_\_\_\_

Daycare Name, Address and Phone \_\_\_\_\_

Other Siblings at School: Name \_\_\_\_\_ Teacher \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- Keep my child at school
- Send home on bus (possibility of no supervision at home)
- Send on bus to alternate location \_\_\_\_\_  
name/address/phone
- Walk home or walk to \_\_\_\_\_  
name/address/phone
- I will pick up my child
- Others authorized to pick up my child **(please inform these people)**

Name: \_\_\_\_\_ Daytime Phone Number(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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