



ALICE E. GRADY ELEMENTARY SCHOOL



Arrival and Dismissal Form

It is important to have this information for the safety of the children

Student's Name: _____
Address: _____
Phone Number: _____
Teacher's Name: _____

Please indicate how your child will be traveling to and from school:

To school (please check one):

_____ by bus: Bus & Stop _____
_____ dropped off

Home from school (please check all that apply and circle days of the week that are applicable):

_____ By bus to home address
Bus # & stop: _____
Everyday, Monday, Tuesday, Wednesday, Thursday, Friday
Will be met by _____ Phone #: _____

_____ By bus to other location
Bus # & stop: _____
Everyday, Monday, Tuesday, Wednesday, Thursday, Friday
Provide drop-off address _____

Will be met by _____ Phone #: _____

_____ Will Walk

_____ Will be picked up by: (please provide all information of all parties you wish to pick your child up, otherwise your child will not be released to that person if no written permission is given)

- 1. _____
- 2. _____
- 3. _____
- 4. _____

Parent's signature _____ Date: _____