

## **CHILD CARE & UNSCHEDULED EARLY DISMISSAL**

Student('s) Name(s):			
CHILD CARE			
If your child/ren wilknow the following:	•	y form of childcare provider, please let us	
Name of Chi	ldcare Provider		
Address of C	Address of Childcare Provider		
Childcare Pr	ovider's Phone Number		
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Name of Chi	ldcare Provider	<del></del>	
Address of C	childcare Provider		
Childcare Pr	ovider's Phone Number		
UNSCHEDULED EAR	LY DISMISSAL		
Is school is dismisse	d early, where should your chi	ild go? CHOOSE ONE RESPONSE ONLY.	
I will	the bus or walk/bike pick up my child at dismissal ti her adult will pick up my child		
Name of Adult:		Work #:	
Home #:	Cell #:	Work #:	
Parent Signature:		Date:	