

Saying Goodbye at the end of the day

Child's Name _____

Teacher's Name _____

Parent's Contact Information

Name _____ Phone _____

Name _____ Phone _____

At the end of the school day, my child _____ will

Ride the school bus

What Days? _____

Go to YMCA

What Days? _____

Go to Children's Center

What Days? _____

Go to Red Shield

What Days? _____

Picked up

What Days? _____

By whom? First & Last Name _____ Phone _____

Relationship to Child _____ Add as emergency contact? _____

By whom? First & Last Name _____ Phone _____

Relationship to Child _____ Add as emergency contact? _____

Other _____

What Days? _____

If you need to make a change to this regular routine, please notify the front office before noon. We will need enough time to contact the teacher and the student to ensure the change will take place. Thank you for your understanding.

Park Hill Office
720-424-4910

Parent Signature _____