

**Birches Elementary School  
Dismissal Form**

**PLEASE PRINT**

Student Name: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Teacher's name: \_\_\_\_\_

Grade: \_\_\_\_\_

Normal Routine ( Check where applicable )

Bus # \_\_\_\_\_

Walker \_\_\_\_\_

Kids Choice \_\_\_AM \_\_\_PM

**Changes to the Normal Routine:**

My child will be picked up by: \_\_\_\_\_ on \_\_\_\_\_ date

Time of pick up: \_\_\_\_\_ AM / PM

Location of Pick up:

\_\_\_\_\_ From the Main Office - ID Required

\_\_\_\_\_ Parent pick up at Kids Choice - ID Required

\_\_\_\_\_ Walker - outside of building dismissal

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

Date \_\_\_\_\_