

Print clearly and return this form to your child's catechist at the first class.

**ST. ALOYSIUS RELIGIOUS EDUCATION 2010-2011 ARRIVAL AND DISMISSAL AUTHORIZATION**

NAME OF CHILD \_\_\_\_\_ HOME PHONE \_\_\_\_\_

PARENTS/GUARDIANS \_\_\_\_\_ CELL PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ GRADE \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**For safety and security, please designate below other responsible adults who have your authorization to pick up your child from class.**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

RELATIONSHIP TO CHILD \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

RELATIONSHIP TO CHILD \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

RELATIONSHIP TO CHILD \_\_\_\_\_

\*\*\*Be sure to notify the people you have designated above.

*In the event that someone other than those designated above are to pick up your child for any reason, the Religious Education office must be notified PRIOR to pick up. Your child will not be dismissed unless we have been notified.*

**PLEASE COMPLETE THE FOLLOWING IF YOUR CHILD WALKS TO OR FROM ST. ALOYSIUS**

My child, \_\_\_\_\_ **has my permission TO WALK TO Religious Education without supervision.** (Applies to 5<sup>th</sup> through 8<sup>th</sup> graders only)

PARENT SIGNATURE \_\_\_\_\_

My child, \_\_\_\_\_ **has my permission to be dismissed TO WALK HOME from Religious Education without supervision.** (Applies to 5<sup>th</sup> through 8<sup>th</sup> graders only)

PARENT SIGNATURE \_\_\_\_\_

*Please be sure to notify your child's catechist of any changes during the school year.*