



2009-2010 DISMISSAL AUTHORIZATION FORM

Student's Name

Grade

I _____ authorize Summit Montessori School to release my child (named above) to the
Parent/Guardian Name
following adult(s) at dismissal time according to the designated schedule. **It is important to note that if you have a restraining order, a divorce decree or other court order which restricts access of any person to a Summit Montessori student, a copy of the relevant document must be on file with the School.**

GENERAL DISMISSAL – Please list the people who will be transporting your child from school. If your child regularly participates in a carpool, the list of carpool drivers **MUST** be included on this form.

Name

Phone

Name

Phone

Name

Phone

Name

Phone

In the event that your child has a set dismissal schedule throughout the year, please feel free to fill out the following. Otherwise, the information above will suffice.

MONDAY

Driver Name Phone

TUESDAY

Driver Name Phone

WEDNESDAY

Driver Name Phone

THURSDAY

Driver Name Phone

FRIDAY

Driver Name Phone