

AFTER SCHOOL PICK-UP PLAN

GRADE: _____

My Child's Name: _____

_____ My child goes to extended care after school.

_____ My child is picked up by his/her father or mother every day.

_____ Our family carools with another family at school.

(Please fill out details below.)*

_____ My child will be picked up by _____
who is our family babysitter.

*My child, _____, has permission to walk or
ride home with _____ with whom I have a carpool
arrangement. My child will be riding with _____ on the
following days of the week: _____.

I understand that if, on any given day, my child will be getting home in another manner other than stated above, I will send a signed note or fax to school giving St. John Fisher permission to release my child to the adult listed in the note. I understand that this includes play dates, changes in carools or pick-up of the child by family members other than the child's father or mother.

Parent Signature

Date