

YEAR: 2019-2020

Last Name:



HARMONY COMMUNITY SCHOOL

Tag Number

Please complete all fields. One form per family.

PARENT 1 PRINTED NAME

PARENT 2 PRINTED NAME

Home Address:

Home Phone:

Student 1:

Grade: _____ Teacher: _____

Student 2:

Grade: _____ Teacher: _____

Student 3:

Grade: _____ Teacher: _____

Student 4:

Grade: _____ Teacher: _____

DISMISSAL METHOD (select one):

Walker Bike Car

Bus Extended Day

Private Transportation

Company Name _____

Special _____

Instructions: _____

ALTERNATE AUTHORIZED PICK UP (other than parents):

Name _____ Relationship _____

Phone _____ Vehicle Description _____

Name _____ Relationship _____

Phone _____ Vehicle Description _____

Name _____ Relationship _____

Phone _____ Vehicle Description _____

Name _____ Relationship _____

Phone _____ Vehicle Description _____

I understand that if I need to make an exception to the mode of transportation it must be communicated via written note in the student's agenda. If no written notification is provided in the student's agenda, it is understood that your student will be dismissed as indicated on this form. A phone call, or verbal instructions from the student, will not be accepted for safety reasons.

Parent/Guardian

Signature: _____

Date: _____

Printed Name: _____