

Gr _____ Rm # _____

Child's Name: _____

**A NOTE FROM HOME TO ST CHARLES REGARDING
SPECIAL END OF DAY DISMISSAL**

From: _____ (Signature)

_____ (print name)

Phone where I can be reached _____

For the Entire Month of _____

For the Entire School Year of _____

on _____ (specific day)

unless indicated differently by me with a note sent to school.

My Child will be: (Check Applicable)

_____ will go to extended care at dismissal

_____ will be going to _____ (activity)

_____ which meets on _____ (day(s) of week)

After the Activity:

_____ will be a car rider picked up by _____

_____ will go to extended care at dismissal

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