

# CATONSVILLE ELEMENTARY SCHOOL EARLY DISMISSAL CONTACT FORM

Please complete only ONE form per family

Daily Dismissal Procedure:

Check here if you are completing this form for more than one child.

Bus  Walker/Car Rider  Daycare (Presbyterian, Karate Van)

Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

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Student: \_\_\_\_\_ Grade: \_\_\_\_\_ Teacher: \_\_\_\_\_

## Section I: Catonsville Elementary School ONLY

**Catonsville Elementary ONLY Dismissal:** A phone tree representative must *speak directly* to the parent or a designated alternate to determine how the child will be dismissed from school in the event of a Catonsville Elementary ONLY closing. Children can be released to their parent, the designated contact or another alternate. Phone calls will only be made to the individuals listed below. Parents list your information first, if you cannot be reached we will call the next person on this list.

**If no one is reached to confirm dismissal, the student must remain with school personnel and parent/guardian will need to come to the school to pick up student.**

Please indicate by numbering to the left of phone numbers, which phone number should be called first for each contact.

CONTACT 1: Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Daytime Number: \_\_\_\_\_  Cell Phone/Pager: \_\_\_\_\_

CONTACT 2: Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Daytime Number: \_\_\_\_\_  Cell Phone/Pager: \_\_\_\_\_

CONTACT 3: Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Daytime Number: \_\_\_\_\_  Cell Phone/Pager: \_\_\_\_\_

## Section II: COUNTY WIDE Closing

**County Wide Dismissal:** Parents **WILL NOT** be contacted if there is a county wide closing. Children will automatically be dismissed as listed below. **PICK ONLY ONE**

\_\_\_\_ Parent only will pick up child    \_\_\_\_ Parent/Alternate will pick up child    \_\_\_\_ Child will be dismissed to After School Care  
\_\_\_\_ Child will ride bus home    Circle One: Presbyterian    Karate Van  
(Bus Color/Stop \_\_\_\_\_)    YMCA here at CES is not an option

**SPECIAL NOTE:** Additional people may be listed to whom your child can be released with the permission of you or your designated contact. These people will not receive phone calls regarding your child's dismissal, but your child can be released to them. Please share the names of alternates on the back of this form, if necessary.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Please remind all alternates to bring appropriate identification when picking up your children.  
It will be necessary for us to confirm identifications prior to releasing the child into their care.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_