Council Rock Primary School
DISMISSAL PASS

To: _____
Teacher's Name

_____ will be
Last Name First Name

☐ riding home on bus # _____ with _____

to _____ on _____
Address Date

☐ picked up early at _____ reason_____

☐ picked up at dismissal by _____
Adult's Name

_____ on _____
Relationship Date

Parent/Guardian Signature _____

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