



Child's Name: _____

On the FIRST day of school, my child will...

- _____ Ride bus # _____
- _____ Be a car rider with _____
- _____ Walk home
- _____ Stay in HES Extended Day Program
- _____ Go to CDC

***Address my child will be
going to in the afternoon:

cell # _____

AFTER the first day, my child will ALWAYS...

(unless I send a note stating otherwise)

- _____ Ride bus # _____
- _____ Be a car rider with _____
- _____ Walk home
- _____ Stay in HES Extended Day Program
- _____ Go to CDC

*** Address my child will be
going to in the afternoon:

cell # _____

If there are any changes, I will notify my child's teacher in writing, on or before the date of the change. Otherwise, my child will be sent home in the above specified way.

Parent Signature _____

Date _____