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 **Student’s Last Name**



**Additional Authorized Names for Student Dismissal**

 The following names, in addition to the names listed on your child’s Emergency Medical Form, are granted permission to transport your child from Saint Michael School throughout the 2025-2026 Academic School Year! **A written note, phone call or email is still required granting the person listed to pick up on that day!** We will not release any child without the parental consent.

 This form will be kept on file throughout the school year. Please keep the school informed of any changes.

**Name**  **Relationship**  **Phone Number**

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Parent Name Parent Signature