



**ELI WHITNEY**  
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Please return this form with your child on the first day of school!

### My Child's Daily Dismissal Plan for 2016-17 School Year (Gr. 4-6)

Child's Name: \_\_\_\_\_  
(Please Print)

Teacher: \_\_\_\_\_

<i>Check Only One Option Per Day →</i>	<i>Bus or Van #</i>	<i>YMCA</i>	<i>Front Walker*</i>	<i>Back Walker*</i>
<b>Monday</b>	<input type="checkbox"/> _____	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<b>Tuesday</b>	<input type="checkbox"/> _____	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<b>Wednesday</b>	<input type="checkbox"/> _____	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<b>Thursday</b>	<input type="checkbox"/> _____	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____
<b>Friday</b>	<input type="checkbox"/> _____	<input type="checkbox"/>	<input type="checkbox"/> _____	<input type="checkbox"/> _____

\* Please list name(s) of person(s) who will be picking up your child each day. This person must be listed on the emergency form for authorized pick-up. *Any change to this daily dismissal plan must be put in writing and sent to the main office.*

Please check here if you give your child permission to walk home by him/herself without adult supervision (grades 4-6 only).

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

Phone Number: \_\_\_\_\_