

**2011-2012**

Student's Name \_\_\_\_\_

Teacher's Name \_\_\_\_\_

**LITTLE MOUNTAIN ELEMENTARY**  
692 Mill Street  
Little Mountain, SC 29075  
(803)945-7721 / 345-1754

**EMERGENCY AND EARLY RELEASE INFORMATION**

Trans. To School: Bus \_\_\_\_\_ Car \_\_\_\_\_ Daycare \_\_\_\_\_ Trans. From School: Bus \_\_\_\_\_ Car \_\_\_\_\_ Daycare \_\_\_\_\_

In case of early dismissal from school (weather, emergency, etc.) Please indicate the proper action:

Send home via: Bus \_\_\_\_\_ Car \_\_\_\_\_ Daycare \_\_\_\_\_ **OR** Contact \_\_\_\_\_

Mother Name: \_\_\_\_\_ Day Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Name \_\_\_\_\_ Phone \_\_\_\_\_

Father Name: \_\_\_\_\_ Day Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**AUTHORIZED PICK-UP / CONTACT:**

In an emergency, major disaster, reasons for early dismissal, or on a daily basis, my child is to be **released only to the following persons:**

- 1. Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_
- 2. Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_
- 3. Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_
- 4. Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_
- 5. Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_
- 6. Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

Students will **not be released to anyone not listed above without written permission** of the parent / guardian.

Date: \_\_\_\_\_ Parent's Signature: \_\_\_\_\_

**GUARDIAN RED FLAG ALERT:**

The following person's are not to have any contact with this student:

- 1. Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_
- 2. Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_
- 3. Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_
- 4. Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: \_\_\_\_\_

In the best interests of your child's safety and peace of mind, we ask that you make it clear to him/her how and with whom he/she will get home from school each day. A written note needs to be sent to the teacher informing him/her each time there is a change in your child's regular manner of getting home. **The school should be contacted, via telephone, ONLY in the case of an extreme emergency.** Following these steps will reduce the potential for error and ensure your child, you, and school personnel that he/she arrives home safely each day of the school year. Please **do not call the school office** to communicate this information to your child. We must have a written note each time there is a change in how your child is to get home. \_\_\_\_\_ (parent initials)

**FOR SCHOOL USE ONLY**

Use this section only for a School / District Emergency or a Major Disaster

Student released to: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Destination: \_\_\_\_\_