

**SCHAGHTICOKE MIDDLE SCHOOL  
PARENT PICK-UP/WALKER PERMISSION FORM**

( Please PRINT all information )

**Dear Parent/Guardian:**

**If your student will either walk home, or be parent pick-up on a regular basis, please fill out the information below and return this form to the SMS main office as soon as possible.**

**If your student will, on occasion, walk home or be picked up from school, you will need to send a separate note in to school each time - stating the reason for dismissal and time of pick up on the note. Thank you.**

**Date:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**Grade:**\_\_\_\_\_ **Team:**\_\_\_\_\_ **Homeroom:**\_\_\_\_\_

**Please circle mode of dismissal that applies: Parent Pick-Up or Walker**

**Please circle the days of the week that your student will be Picked-Up or Walk Home:**

**MONDAY TUESDAY WEDNESDAY THURSDAY FRIDAY**

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Print Name**