

Dear Parents;

Please complete the lower portion of this page and return it to the front office by **Friday, August 31st**. We will use this information to cross check our after school arrangements information for each student to help ensure a smooth end of the day transition for everyone. You may mail the form to the Lower School office or drop it by when you are in for the Classroom Open House from 8:30-10:00 on 8/31.

If you have any questions about this form or your child's after school plans in general, please do not hesitate to call us at 301-774-7455 x112.

Thank you for your help!

Lee Lanou & Pam Gilmer

C.A.B. Form

(Carpool / Aftercare / Bus, End-of-day Plan)

Student: _____ Class: _____
Parent Signature: _____ Date: _____

Please indicate your child's after school plans for each day of the week.
We will use this information to cross check our lists every day.

*Use **C** to indicate carpool, **A** to indicate Aftercare, **B** to indicate bus.*

Mon _____ Tues _____ Wed _____ Thu _____ Fri _____

Persons with permission to pick up my child (other than parents or emergency contacts):

Name _____ Name _____

Name _____ Name _____

Additional Information: _____

EARLY CLOSING CONTACT/PERMISSION

In the event that Sandy Spring Friends School should need to close before the end of the school day because of snow or other emergencies and I am unable to come for my child, he/she may ride home with:

Name _____ Phone # _____