Indialantic Elementary School Student Dismissal Form: KINDERGARTEN

| Student's Name: | | Teacher: | Grade: K |
|--|----------------|---------------|------------------|
| Social Distancing is expected on BPS property. Masks are optional. (Subject to change.) | | | |
| Parents/Guardians are responsible for notifying the school of how their students are to be released as well as being familiar with the school calendar and dismissal times. Please read all areas below prior to identifying your dismissal plan. | | | |
| In order to help with social distancing, we kindly ask that you abide by the following for gate dismissal plans: | | | |
| If you live North of Niemira Ave. & East of Ramona Ave. use the Office Gate after buses leave. If you live South of Niemira Ave. & East of Ramona Ave. use the South Car Loop Gate. (No meeting parents here please) If you live North of Franklyn Ave. & West of Ramona Ave. use the North Gate. If you live South of Franklyn Ave. & West of Ramona Ave. use the West Gate. | | | |
| It is recommended that all kindergarten students be picked and dropped off in a car through the car loop. | | | |
| Select one dismissal plan |): | | |
| Car Loop | Bus# | Brevard After | SchoolBusy Bears |
| North Gate* | West Gate* | Car Loop Gate | * Office Gate* |
| Dismissal During Inclement Weather Notice: Per Brevard Public Schools policy for inclement weather, students may only be released after the inclement weather has passed and the all clear has been given. Your patience during these times is appreciated. I understand that school personnel will follow the plan indicated above EVERY DAY. In the event of an unexpected situation, I will contact the school office as soon as possible. It is my responsibility to update this form as needed. I have received, and/or reviewed the school calendar and am aware of all types of changes to the school day (i.e. early dismissal, student holidays, etc.) and will plan accordingly. | | | |
| Initial to confirm the following: Persons picking up kindergarten students may be asked for identification, please have your ID available. My child knows to go to his/her teacher or the main office if there is an unexpected change to our regular plans. My child is aware of our family plan for leaving school grounds each day. Changes to this plan may only be made in writing and must be given to the homeroom teacher in advance. Students not picked up by 3:00 will be placed in aftercare (\$25 registration fee + \$26 drop in fee = \$51). | | | |
| Parent/Guardian Signature | | Date | |
| Please Print Name of Paren | t/Guardian | | |