

## Upper Elementary Self-Dismissal Permission

ANCHOR POINT MONTESSORI 1351 Hornby Street, Vancouver, BC V6Z1W7 Telephone: 604.677.1958

Name of Student	Home Telephone	
Name of Parent/Guardian	E-mail	
Name of Parent/Guardian	E-mail	
Lions Gate Montessori understands that some families we school or after school program. It is the policy of LGMS to allowed to "self-dismiss" from the school, and only if prior with LGMS. By submitting this written consent, the parer Montessori Society, North Creek/Anchor Point Montessor party from any liability associated with the child leaving to authorized adult.	that only students in Upper Elementary an or written permission from the parent/guard nt/guardian gives permission and releases ori, and its employees, directors, volunteer	nd up are dian is on file s Lions Gate rs, and third
A. Unsupervised Dismissal Consent: I give permission at the end of the school day, alone or with other students return home or to such other destination as I have instruchild will not be supervised by any school employee follower turn home in a timely fashion, I will notify the school. Uchild to return home in a timely fashion will terminate his	s having similar permission. I have instructed (eg. via public transportation). I unde owing such dismissal. In the event that my Ipon such notification, I understand that the	eted my child to erstand that my or child does not ne failure of my
□ Yes □ No Parent/Guardian Signature	Date	(mm/dd/yy)
Parent/Guardian Signature	Date	(mm/dd/yy)
<b>B. Impact of Consent:</b> I understand and acknowledge facilities unsupervised (without a parent/guardian or other employees, directors, volunteers, and third party will have consequential damages following such dismissal from the consequence of	er authorized adult) at dismissal, the schoole or no liability for injury, damage expense of	ol, its or other
☐ Yes ☐ No Parent/Guardian Signature	Date	(mm/dd/yy)
Parent/Guardian Signature	Date	(mm/dd/yy)
Restrictions:  ☐ My child must phone a parent before departing f ☐ My child may only depart at the end of the day o ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ My child may only depart from school at ☐ Other restriction(s):	n the following days: (Please check) ☐ Friday	
Parent/Guardian Signature	Date	(mm/dd/yy)
Parent/Guardian Signature	Date	(mm/dd/yy)