

MVCS CAR POOL INFORMATION

Please fill out car/carpool information and return to the school.

Student(s) name(s): _____

Individuals authorized to pick up your child(ren): _____

If you are in a carpool, please identify those arrangements below:

	Arrival	Dismissal
Monday	_____	_____
Tuesday	_____	_____
Wednesday	_____	_____
Thursday	_____	_____
Friday	_____	_____

Please note: If arrangements change for any day, you must notify the school office. Children will not be put in another car without a parent's permission. Verbal communications from your child will not be sufficient to honor a change in transportation plans. ***Please alert us to any special circumstance about your child's transportation.***

Parent/Guardian Signature: _____

Date: _____