

TRINITY LUTHERAN SCHOOL
EARLY ARRIVAL PERMISSION FORM
20__-20__

I, _____, request permission to
(Print parent name)
bring my child(ren) to school before 8:00 am. I have read and understand what is stated
in the school handbook concerning this policy.

Approximate time of arrival: _____

	Child's Name	Grade
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

Parent Signature: _____

Date: _____