

**A Note to Lionville Elementary School
Please Print**

Date: _____

To: Office Teacher

Teacher's Name: _____

From: _____
(First and Last Name)

Child's Name _____
(First and Last Name)

Picked up by (if different from above):

(First and Last Name)

Carpool Office - Time _____

Signature: _____

Additional info/notes from parent/guardian →→→→

Teachers Initials: _____

Place Student will be: _____

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