

Permission Slip - Carpool Dismissal

St. James Parish 94 Broad Street Red Bank, NJ 07701

Student Name:	Grade/Class:
Address:	
Parent Phone:	
Parent email:	
I, the parent/guardian of the above-named student, grant my p Religious Education from September 15, 2024 to May 18, 2029	
Driver Name & phone:	
Driver Name & phone:	
Driver Name & phone:	
* Adults who are picking up children from multiple families required to sign-out each child. If a carpool permission sli Faith Formation the parent(s) will be contacted before the	p has not been returned to the Office of
I agree to waive any liability against St. James Parish and all c representatives as to any and all claims for any injury to the ch	

Parent/Legal Guardian Print Name

Signature

Date