

City of Faith Christian School

Advancing the Kingdom Of God by Developing the Next Generation of Leaders

3445 & 3453 White Plains Road ♦ Bronx ♦ New York 10467 ♦ Tel: (718) 798-3052 ♦ Fax: (718) 652-5442

Student's Departure Form

Student's Name: _____

Grade: _____ Teacher: _____

The following person(s) are allowed to pick up my child once school is dismissed:

Name	Relationship to Student	Telephone #

Please inform each person that proper identification is required when picking up a child.

Signature of Parent/Guardian

Date

Signature of Parent/Guardian

Date