



SENIOR EARLY DISMISSAL PERMISSION FORM

2023-2024 School Year

Student Name:	
Parent/Guardian Name:	
Parent/Guardian Phone Number:	
Parent/Guardian Email:	

My son has my permission to participate in Senior Privilege Early Dismissal. I/We understand that seniors are extended the privilege of early dismissal only on days that their scheduled classes end before 2:30pm. Seniors <u>must sign out in the Main Office</u> prior to leaving the building and may not leave before the END of 6^{th} period.

My son and I have reviewed his schedule and the school's policy on early dismissal. I understand that my son is expected to be present and on time for all classes. Failure to attend class because of early dismissal is cutting class, and disciplinary action will be taken. I will review the importance of following all NJ Motor Vehicle regulations with my son especially those limiting the number of passengers. The Administration extends this privilege to the senior class based on their cooperation, good conduct, and academic standing. This privilege may be revoked for individuals or the entire class at any time as deemed appropriate by the administration.

RELINQUISH OF CLAIMS AGAINST Christian Brothers Academy ONLY

I/We agree to indemnify, hold harmless, waive and relinquish all claims I/We may have against Christian Brothers Academy including any negligence claims on their part and its officers, agents, employees, representatives or volunteers arising out of, in connection with the early dismissal policy including but not limited to transportation to and/or from the school.

Parent/Guardian Signature:_____

Date:_____

I understand that I am responsible for checking my schedule and being present and on time for all classes. Failure to attend class because of late arrival/early dismissal will be treated as cutting class and disciplinary action will be taken. I agree to follow all NJ Motor Vehicle regulations especially those limiting number of passengers.

Student Signature:_____

