



Andover School District

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Dr. Sally Doyen
Superintendent

Mr. John Briody
Principal/Director of Curriculum

Assistant Principal/Director of Special Ed

August, 2016

Dear Parent/Guardian,

Please complete the following form to be used in the event of a state or national **CODE RED emergency**.

YOUR CHILD/CHILDREN'S NAME(S)

TEACHER

Please list the names of anyone you give permission to pick up your child/children in the event of a **CODE RED emergency**. A picture ID will be required for anyone other than a parent.

NAME

RELATIONSHIP

Parent/Guardian Signature: _____ DATE: _____

For Office Use Only

Child/Children picked up by: _____ DATE: _____