



Hilda Lakti School  
 41535 Old Hwy 30  
 Astoria, OR 97103



END OF SCHOOL DAY PLANS

*My child will go to the following location daily after school. If my child needs to go elsewhere, I will send a note stating the change. I understand that changes to bus/pick up notes need to be made prior to 2 p.m.*

*Student Name:* \_\_\_\_\_

\_\_\_\_\_ *Please send my child home to our residence EVERYDAY by bus*

\_\_\_\_\_ *My child will be a daily pick up by* \_\_\_\_\_

*(example: mom, dad, grandma, etc.)*

\_\_\_\_\_ *My child will go to the following home EVERYDAY:*

*Name:* \_\_\_\_\_

*Address:* \_\_\_\_\_

*Phone Number (\_\_\_\_) \_\_\_\_\_*

*Parent Signature:* \_\_\_\_\_ *Date* \_\_\_\_\_

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**FOR SCHOOL USE ONLY:**

*Bus Route* \_\_\_\_\_

*Bus Garage Notified* \_\_\_\_\_