



St. Pius X Religious Education Early Dismissal Request

*Please print clearly.

Date: ___/___/___ Student Name: _____

Class (circle): Mon Tue Wed Grade: _____ (circle) A or B

Catechist Name: _____

Time of Pick-Up: _____:_____ PM

Person Picking Up Student: _____

Relation to Student: _____

Parent/Guardian Signature: _____