



Orangetown Jewish Center Religious School

Rabbi Craig Scheff

Rabbi Paula Mack Drill
Associate Rabbi

Sandra Borowsky
Educational Director

Glenn Hirsh
President

PERMISSION FOR DISMISSAL FORM

2009-2010

I give permission for my child/children

_____.

To be picked up by

Name: _____

Relation to child _____

Name: _____

Relation to child _____

Name: _____

Relation to child _____

Parent or Guardian's Signature/ Date
