THANKSGIVING BREAK LEAVE FORM

Student Name	
Departing Date and Time *Student will be available for pick up from 12:00-1:00pm from their dorm*	
Departing campus by car with Name of Parent or Authorized Adult	
Name of Parent or Authorized Adult	
Returning Date and Time *If you are returning your student to his or her dorm, please return from 3:00-5:45pm*	
Returning to campus by car withName of Parent or Authorized Adult	
OR Tallulah Falls School RIDESHARE/BUS SHUTTLE service	
() My student will ride the shuttle from Tallulah Falls School to Indian Trail RideShare lot (Exit #101- Off of I-85 North and South)	t
Leaving Indian Trail RideShare lot with: Name of Parent or Authorized Adult () My student will ride the shuttle from Indian Trail RideShare lot to Tallulah Falls School	I
Returning to Indian Trail RideShare lot with: Name of Parent or Authorized Adult	
<u>OR</u>	
Tallulah Falls School AIRPORT shuttle service	
Flights need to depart AFTER 5pm and return NO LATER than 2pm	
) My student will ride the shuttle from Tallulah Falls School to Hartsfield-Jackson International Airpo DEPARTING FLIGHT AIRLINE, NUMBER AND DEPARTURE TIME	ort in Atlanta
) My student will ride the shuttle from Hartsfield-Jackson International Airport in Atlanta to Tallulah RETURNING FLIGHT AIRLINE, NUMBER AND ARRIVAL TIME	Falls School
Parent or Guardian Signature	-

EMAIL FORM TO: sarah.lowry@tallulahfalls.org