

Collection / non-collection of children form

Child's Name: _____ Class: _____

The following person/people have permission to pick-up my child from school on a regular basis: (Please include both parents' names and details if they will be collecting the child)

<u>Name</u>	<u>ID Card Number</u>	<u>Days of week they pick-up</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I understand this form gives permission to the above-named individual to pick-up my child on the stated days only. If this schedule changes I must notify the office in writing.

OR

My Child is to go home unaccompanied (only possible for Children in year 6 or above).

(Yes/No/Not applicable).

OR

My child is to go home with a sibling.

Name of sibling: _____

OR

My child is to go home with school transport.

(Yes/No/Not applicable).

Parent's Signature: _____

Date: _____