

**PARENT PERMISSION FOR CHILD PICKUP
 2019-2020**

STUDENT INFORMATION:

First Name: _____ **MI:** _____ **Last Name:** _____

Please list the name and phone number of each individual permitted to pick up your child.
 A picture ID will be required for child pick up when it is not the child's primary caregiver, mother or father.

- | | |
|----------|-------------|
| 1. _____ | Phone _____ |
| 2. _____ | Phone _____ |
| 3. _____ | Phone _____ |
| 4. _____ | Phone _____ |
| 5. _____ | Phone _____ |
| 6. _____ | Phone _____ |

A change of information form will be available to parents at the sign in and out area. Please let us know if a child's drop off or pick up arrangements change. Thank you.

Parent/Guardian Signature: _____ **Date:** _____