

**Child Collection /Pick Up Authorisation**

Parents / carers will be given permission to collect based on information added below. Please also add anyone else who might be likely to pick up on your behalf. In the case of one of these people collecting your child we will require that they display suitable identification before they will be allowed to take your child.

Name of Child:……………………………………………….. Class……………………

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| **Name** |  |
| **Contact telephone No.** |  |
| **Relationship to Child** |  |

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| --- | --- |
| **Name** |  |
| **Contact telephone No.** |  |
| **Relationship to Child** |  |

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| **Name** |  |
| **Contact telephone No.** |  |
| **Relationship to Child** |  |

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| **Name** |  |
| **Contact telephone No.** |  |
| **Relationship to Child** |  |

Parent Signature: ……………………………………. Date……………………

Parent Name: …………………………………………………………………………..