

## Pick Up List

Your child will only be released to a parent/guardian or to those authorized in writing by their parents/guardians. For protection of your child, identification will be required.

Name	Relationship	Phone
Name	Relationship	Phone
Name	Relationship	Phone
Name	Relationship	Phone

If you have a **Day Care Provider** transporting your child to/from preschool on a regular basis, please include their name and contact phone number below.

Name

Phone

## **Additional Information**

**Parenting Plans, Joint Custody, Restraining Orders**, Other (Please note specifics of who, where, when, etc. – and include copy of any documentation).

Permission to pick up?  Yes  No	Permission	to pick up?	🗖 Yes	🗖 No
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## \*\*\*PLEASE ADVISE THE PRESCHOOL DIRECTOR OF ANY CHANGES TO THIS FORM\*\*\*