



## Authorization to Pick Up Child

Child \_\_\_\_\_  
Parent(Guardian) \_\_\_\_\_  
Parent(Guardian) \_\_\_\_\_

The following people are authorized to pick up above named child from Tolland Cooperative Preschool on a regular basis:

NAME	RELATIONSHIP	CARPOOL/SPECIFIC DAYS

The following people are authorized to pick up above named child from Tolland Cooperative Preschool with prior verbal notice:

NAME	RELATIONSHIP

We understand that if a person not listed above is picking up our child from Tolland Cooperative Preschool one of us will inform the teacher with a note including the date, name of person picking up, and signature.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

(Valid one year only)