



# Authorisation For Pick Up

**Child's Name:** \_\_\_\_\_ **Room:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I wish to advise that the following person is authorised to pick up my child (please tick one box):

For today only

Whenever I inform staff

Each day for the following period \_\_\_\_\_

**Name of Authorised Person:** \_\_\_\_\_

**Relationship to Child:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

This authorised person will need to report to a staff member upon arrival and show identification.

Please note that staff need to be notified each day if someone other than the child's parents or primary caregivers are picking them up.

**Parent Signature:** \_\_\_\_\_