

SPP AUTHORIZED PICK-UP FORM

2018-2019

The people listed below are authorized to pick-up my child from St. Paul's Preschool. I have provided phone numbers if they are needed to be contacted for transportation purposes. I understand that this list must be signed by *both* parents and be on file at the preschool prior to my child's attendance. I will update as needed during the school year.

NAMES OF CHILDREN

MOTHER: _____ **Contact Number:** _____

FATHER: _____ **Contact Number:** _____

SITTER/NANNY: _____ **Contact Number:** _____

OTHERS: _____ **Contact Number:** _____

OTHERS: _____ **Contact Number:** _____

OTHERS: _____ **Contact Number:** _____

SIGNED: _____ **and** _____
Mother Father

Date: _____