

Collection of children at the end of the school day

Name of child(ren).....

.....

Class.....

I authorise the following people to collect my child(ren) from school:

Name & relationship to child:

1.....

2.....

3.....

4.....

Parental signature.....

Date.....

If there are any changes to these arrangements please inform the school in writing. In the case of emergencies/last minute changes please phone the office on 01564 826709 or text on 01564 432005.

Year 5 and 6 children will only be allowed to walk home by themselves if we have received written permission from parents/carers.

I give my permission for my child _____

in Class _____ to walk home by themselves.

_____ Parent/Carer _____ Date