



Release/ Pickup Authorization

I understand that participants in this afterschool programme will not be permitted to leave with anyone other than the person(s) I have listed below:

Name _____
Relationship to child _____
Signature of person Picking up child _____
Date _____

If I can't be reached, I give permission for the following person(s) to pick-up my child from the afterschool programme.

Name 1: _____ Name 2: _____

Relationship to child: _____ Relationship to child: _____

Contact number: _____ Contact number: _____