

AUTHORIZATION FORM FOR STUDENT PICK UP (Form A-1)
HANOVER CHURCH PRESCHOOL

Student Name: _____

Class: _____

Parent/Guardian Signature: _____

Date: _____

Please list all individuals who are authorized to pick up your child at the end of class.

NAME

PHONE NUMBER

Please note that if someone will be picking up your child who is not on the list, the parent/guardian must call the Teacher prior to dismissal to provide the name. See Section 7.4 of the Hanover Church Preschool Handbook for more information.