

Authority for Child Collection

Please complete this form if you wish any adult/s other than parents/guardians to collect your child at the end of the school day.

I authorise the following person/s to collect my child from school with effect from the date below. This authority will remain in force until cancelled by me in writing.

***This authority is in addition to/supersedes all other instructions already held by Chalton Lower School for the collection of my child.**

* Please delete as applicable

Child's name	Person to collect

Signed.....

Please Print Name.....

Date.....