



ALTERNATE PICK UP AUTHORITY

Dear Childcare Co-ordinator,

I (Parent/Guardian - print name)
give my written consent for the following person/s to collect my child/ren on my behalf:

Child/ren's Name/s	Person Authorised	Signature of Authorised Person

I will continue to notify the Pole Depot Community Centre regarding any change of person/s collecting my child/ren for each day that this occurs.

Yours faithfully

Parent/ Carer's Name (print)	
Parent/ Carer's Signature	Date

.....
OFFICE USE ONLY

Form Checked By		(Staff Name)
Staff Signature		Date

Form Processed By		Date
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Filed By		Date
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