

# Collection Arrangements Form



Please complete this form with the names of the people you wish to collect your child from school, **including yourself**. It is of paramount importance that you keep this record up to date and inform school of changes throughout the school year. Also please be aware that if the person collecting your child is **not** on the list below we will **not** allow your child to leave the school premises. If we are unsure of the person collecting your child we will ask for these details in full, if they are given to us incorrectly we will contact you and not allow your child to leave school.

Child's Name \_\_\_\_\_ Year \_\_\_\_\_

First Name	Last Name	Password (something memorable and personal to you)	Relationship to child (Mum / Dad / Nan/ friend of family, etc)

**Year 5/6 children ONLY** – please sign below if you would like your child to walk home by themselves after school.

Signed: \_\_\_\_\_ Print: \_\_\_\_\_ Date: \_\_\_\_\_

If you have the name of somebody you do not want your child to go home with, please indicate this below:

First Name	Last Name	Legal order ?

**In the case of an emergency you may wish for your child to be picked up from school by somebody who is not named on the above list. If this is the case please inform the school before 3pm, your child will then be taken to the school office for collection and a form of ID will be required by the person collecting your child. Please be aware that this is a security measure and is intended to protect the safety of your child.**

Parent/ Carer Signature \_\_\_\_\_ Date \_\_\_\_\_