PUPIL COLLECTION AUTHORISATION FORM

Academic Year: 2026/27

Child Name: _____ **Year:** _____

AUTHORISED COLLECTORS

Please list all adults who are authorised to collect your child from school. Anyone collecting a child should have written permission from that pupil's parent or carer.

Name	Relationship to Child	Password

COLLECTION RESTRICTIONS

Are there any restrictions on who can collect your child? ☐ Yes ☐ No

If yes, please provide details (attach court order documentation if applicable):

WALKING HOME ALONE (YEARS 5&6 ONLY)

I give permission for my child to walk home alone: ☐ Yes ☐ No

Parent/Carer Signature: _____ **Date:** _____

For last-minute changes to collection arrangements, please contact:

- **School Office:** 01543 421850
- **Message on the Arbor App**
- **Available:** 8:15am - 4:30pm (term time)

The importance of notifying school as soon as possible if collection arrangements change cannot be overstated for your child's safety.

LATE COLLECTION

Persistent late collection may result in a meeting with the senior leadership team.

DECLARATION

I confirm that:

- The information provided is accurate and up to date
- I will inform the school immediately of any changes to these arrangements
- I understand that the school will never allow anyone who's not listed as authorised to collect my child without contacting me to verify their identity first
- I understand that I am responsible for my child's safety outside of school

Parent/Carer Name (print): _____

Signature: _____ **Date:** _____