CARPOOL PERMISSION FORM

Student's Name: The following people have my permission to pick up my child from Promises Preschool at Three Chopt Presbyterian Church at any time during the 2019-2020 school year (it is NOT necessary to include your name).				
	(Parent's initials) No other	r person except parent	ts are authorized to	pick up my child.
	•	names of adults authori onship to the child with		
	Last Name	First Name	Relationship	Cell phone #
1				
2				
3				
4				
5				
When a	the individuals listed above iated.	will be picking up you	r child, written notij	fication is
Signat	ure of Parent/ Guardian			Date