

**PERMISSION FOR DISMISSAL & EMERGENCY CONTACT INFORMATION**  
Haymarket Baptist Church Preschool and Kindergarten  
2010-2011

**Child's name:** \_\_\_\_\_ **Teacher's name:** \_\_\_\_\_  
Please print      LAST                      FIRST

I hereby give permission for my child to be dismissed with the following adults (persons must be at least 18 years of age). Include both parent names, grandparents, relatives, friends and neighbors and day care providers that might be called upon to pick up your child.):

NAME	CONTACT NUMBER
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Please list two people we can contact in the event of an emergency and we can not reach a parent:**

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**\*On occasion, if your child needs to be picked up by another person not listed on this form, you must send a written note giving your permission, and include the person's name, the date, and your signature. This person must provide identification upon pick up. All permanent changes to this form must be made in person at the office.**

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_