**PERMISSION FOR DISMISSAL & EMERGENCY CONTACT INFORMATION**

Haymarket Baptist Church Preschool and Kindergarten

2017-2018

**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 Relationship Contact Number**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MOTHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FATHER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Please list two people we can contact in the event of an emergency and we cannot 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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_